Borough of Brighouse

Annual Report

of the

Public Health Services

of the Borough of Brighouse

1956

FRANK APPLETON, M.B., Ch.B., D.P.H., D.P.A.
Medical Officer of Health

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Health and Cleansing Committee

(As at December 31st, 1956)

His Worship the Mayor :
Councillor H. EDWARDS, J.P.

Chairman :
Councillor L. KAYE, B.Sc.

Vice-Chairman :
Councillor L. CATTON

Ald.	E. R. HINCHLIFFE	Coun.	J. A. HALLOWELL, J.P.
,,	G. A. STILLINGFLEET	,,	F. HARRISON
,,	W. WHITELEY, C.B.E.	,,	L. HULME
Coun.	J. S. ARMITAGE	,,	Mrs. M. R. MITCHELL
,,	A. G. BRACKENBURY	,,	G. TURNER, M.C., J.P.

MATERNITY AND CHILD WELFARE SUB-COMMITTEE

His Worship the Mayor : Councillor H. EDWARDS, J.P.

Councillor L. KAYE, B.Sc. (Chairman)

Councillor L. CATTON (Vice-Chairman)

Coun.	F. HARRISON	Mrs.	E. R. HINCHLIFFE
,,	L. HULME	,,	J. W. LEACH, J.P.
,,	Mrs. M. R. MITCHELL	,,	C. PETTY
,,	G. TURNER, M.C., J.P.	,,	M. PICKARD
The Mayoress :		,,	W. SYKES
	Mrs. H. EDWARDS	,,	E. TATTERSALL
Miss	M. BOTTOMLEY	,,	G. TURNER

Health Department

PUBLIC HEALTH OFFICERS

Medical Officer of Health :

F. APPLETON, M.B., Ch.B., D.P.H., D.P.A. Also Divisional Medical Officer, Division 18, West Riding County Council.

Deputy Medical Officer of Health and Deputy Divisional Medical Officer :

R. D. HAIGH, M.B., Ch.B., D.Obst. R.C.O.G., D.P.H.

Assistant County Medical Officers for Division 18, West Riding County Council :

Miss E. ATKINSON, M.B., Ch.B., D.Obst.R.C.O.G.

Orthopædic Surgeon :

**J. HUNTER ANNAN, F.R.C.S.

Ophthalmic Surgeons :

**S. ROBERTSON, M.B., Ch.B., D.O.M.S.
**P. M. WOOD, M.B., Ch.B., F.R.C.S. (Edin.), D.O.M.S.

Dental Officer :

J. TODD, L.D.S.

Chief Public Health Inspector and Cleansing Superintendent :

W. JENNINGS, M.S.I.A., M.Inst.P.C., M.R.S.H.
Cert. Insp. of Meat and Foods.
Testamur Institute of Public Cleansing.
Cert. Smoke Inspector.
Diploma Institute of Hygiene.
(Commenced 9th November, 1956).

C. R. MOSS, M.B.E., F.Inst.P.C., F.S.I.A.
Ollett Gold Medallist—Sanitary Inspectors' Association.
Assoc. Member Institute of Sanitary Engineers.
Cert. Royal Sanitary Institute.
Cert. Inspector of Meat and Foods.
Testamur Institute of Public Cleansing.
(Terminated November, 1956).

Deputy Chief Public Health Inspector :

W. JENNINGS, M.S.I.A., M.Inst.P.C., M.R.S.H.
Cert. Insp. of Meat and Foods.
Testamur Institute of Public Cleansing.
Cert. Smoke Inspector.
Diploma Institute of Hygiene.
(Commenced 8th March, 1956. Appointed Chief Public Health Inspector, as from 9th November, 1956).

J. F. ASPINALL, M.S.I.A., A.M.Inst.P.C.
Cert. R.S.I. and S.I.J.E.B.
Cert. Inspector of Meat and Foods.
Diploma Institute of Hygiene.
Testamur Institute of Public Cleansing.
(Terminated 31st January, 1956).

Additional Public Health Inspectors :

R. CROSSLEY, M.S.I.A.
Cert. Inspector of Meat and Foods.
Diploma Institute of Hygiene.
(Commenced 13th February, 1956).

E. A. HOLDSWORTH, M.S.I.A.
Cert. R.S.I. and S.I.J.E.B.

Acting Senior Health Visitor :

Miss M. LATIMER, S.R.N., S.C.M.
Health Visitor's Certificate.
Queen's Nurse.

Health Visitors :

Miss B. M. GREENWOOD, S.R.N., S.C.M.
Health Visitor's Certificate.
Queen's Nurse.

Miss F. R. HANDY, S.R.N., S.C.M.
Health Visitor's Certificate.

Miss M. TYLER, S.R.N., S.C.M.
Health Visitor's Certificate.
Queen's Nurse.

School Nurse :

Miss A. D. ANDERSON, S.R.N., S.C.M.
(Terminated April, 1956).

Assistant Health Visitors :

*Mrs. M. ARMITAGE, S.R.N.

Mrs. N. FOSSARD, S.R.N., S.C.M., R.F.N.

*Mrs. I. HEPWORTH, S.R.N., S.C.M., R.F.N.

Midwives :

Miss W. LISTER, S.R.N., S.C.M.

Miss N. SIDEBOTTOM, S.R.N., S.C.M.

Miss M. E. THOMPSON, S.R.N., S.C.M.

Home Nurses :

Mrs. E. N. FEATHER, S.R.N.
Queen's Nurse.

Mrs. B. HOPSON, S.R.N., R.F.N.
Queen's Nurse.

Mrs. A. M. RUSHWORTH, S.R.N.
Queen's Nurse.

Mrs. F. SYKES, S.R.N., S.C.M.
Queen's Nurse.

Mental Health Social Worker :

*Miss E. C. WROE, S.R.N., S.C.M., R.M.N.
Health Visitor's Certificate.

Tuberculosis Health Visitor :

Mrs. M. F. DUCKENFIELD, S.R.N., S.C.M., T.A.

Staff at Wellholme Park Day Nursery :

Miss M. E. SHEFFIELD, R.F.N., Matron.

Mrs. D. S. FREEMAN, S.R.N., S.C.M., Deputy Matron

These personnel were assisted by a staff of Certificated Nursery Nurses and Nursery Assistants.

Senior Clerk :

G. O. RICHARDSON

Clerks :

Mrs. D. CHEETHAM
Miss J. HARTLEY
Miss I. HOLMES
Mrs. G. HURLEY
Mrs. E. JOHNSON
Miss A. W. PEARSON
Miss J. PEARSON (Commenced September, 1956)
J. R. C. WELLS (Terminated November, 1956)
Miss J. YOUNG

Cleansing and Sanitary Section :

Miss C. M. AINSWORTH
Mrs. B. ROBERTS
Mr. J. COLEMAN (Cleansing Department)

Divisional Depot Superintendent, County Ambulance Service :

W. ANDERSON

* Part time

** Part time by arrangement with the Regional Hospital Board

TO THE MAYOR, ALDERMEN AND COUNCILLORS OF THE BOROUGH OF BRIGHOUSE

Mr. Mayor, Madam and Gentlemen,

I have the honour to present the Annual Report on the work of your Public Health Department for 1956.

Much of this Report is an account of the personal health services. These are, of course, carried out in my capacity as Divisional Medical Officer for the West Riding County Council. I am helped and strengthened in this work by the good advice and helpful co-operation of the Maternity and Child Welfare Sub-Committee. This Committee has now no statutory duties but its members have continued to meet quarterly and give very helpful advice.

We are concerned with community health and much of our work and indeed almost all our work for the Borough is on problems of environmental health. But community health is the summation of individual personal health and we are concerned vitally with the personal health of every member of the community. Naturally we can give most help to the ones who need it most, to the weakest members of the community. These include the very young and the very old and the mentally ill, and a report on our work with these people is given herein.

Previously, I have referred to the essential provisions necessary for satisfactory community health. These are, in my opinion, a sufficiency of clean water, clean food and clean air, a satisfactory dwelling, adequate clothing and an adequacy of leisure which is properly employed. Clean water we have attained, and a satisfactory water supply is taken for granted. Clean food has not yet been attained, nor will it be until every member of the community realises the importance of personal cleanliness. New Food Hygiene Regulations came into force during the year, and your Public Health Inspectors have spent a great deal of time in explaining this new legislation to all the proprietors of food premises. Arrangements have been made for courses of lectures to be given to food handlers, and we have received a large amount of co-operation from persons concerned in the preparation and distribution of food. Modernisation of premises, and a full awareness in shops among all the people distributing food to the public would be made more effective if more public interest was taken in securing clean food. Members of the public have been known to place babies and young children on shop counters where food is being distributed ; dogs are still taken into food premises ; people still feel loaves to see whether they are of the right degree of freshness, and many members of the public think nothing of handling food and replacing it for the consumption of others. Legislation exists for dealing with dirty food handlers, but much of the work done by this department and others is mitigated by public carelessness. On the whole, in this area, we have a good

standard of food hygiene, a standard which would be better if more public interest was shown in the problem.

This year was important too, for a Government endeavour to attain clean air, and the Clean Air Act of 1956 become law in July, and much of it will be operative in 1957.

The Council's endeavours in the rehousing of the people from unsatisfactory homes have been, in my opinion, the greatest single contribution made to good community health in this Borough. More than one-ninth of the houses in the Borough are now owned by the Corporation, and almost two-thirds of these have been built since the war. In addition, Corporation grants have been made for the improvement of existing houses. Unfortunately, most of the applications for improvement grants have been made by persons who own their own houses, and very few applications have been received from landlords to improve their houses for the benefit of themselves and their tenants. In November, the Council decided that improvement grants should be temporarily suspended. I hope that when the Council feel able to renew these grants, owners of tenanted property will take the opportunity to improve their property and make more comfortable their tenants.

In July, an official representation was made of the first three areas of our slum clearance programme. Together they included 148 houses. Four other houses were dealt with under the Housing Acts. The 152 houses thus dealt with comprises half the programme envisaged in the first five years under Section 1 of the Housing Repairs and Rents Act, 1954.

Not only do our Council houses provide happy homes for many families and a standard of living for the children not possible in their parents' childhood, but they also serve, too, in the work of smoke abatement by the removal of tenants from overcrowded premises to fairer surroundings, thus preventing the appalling smoke nuisance that exists when domestic premises are crowded together, and we hope that one day soon it will be possible for all our Council Estates to become smoke control areas.

Another development of post-war housing has not been quite as satisfactory. Naturally it is the young who wish to move and the young family who need to move. As a result, separation between the mother of a family and her own aged parents has occurred. This has not been as general as might be expected for the Council have provided old people's bungalows on their estates, but the placing of families into their own separate houses has, in some instances, made it impossible for the same amount of attention to be paid to the aged. The many clubs that now exist in the district have helped to fill this gap, and our ever-growing Home Help Service is proving a boon to many old people who still retain their own home. Unfortunately, the number of beds for chronic sick has not increased, and I am

glad to know that the Old Folks Welfare Association is considering a scheme for the provision of night sittters for old persons, living alone without friends and relatives, who are temporarily ill. This scheme will not, of course, take the place of the devoted and willing service of the old people's relatives. The Old People's Clubs have a most happy atmosphere and many of them now visit, in their own homes, members temporarily indisposed and unable to attend. We hear a good deal today, and rightly so, about mental health and the contribution that these Clubs make to the mental health of the elderly is considerable.

It is hoped that it will be possible sometime in the future to establish a community centre for old people on our housing estates, where meals can be provided. Many of the old people, and particularly those living alone, have very unsatisfactory meals. Rather than trouble to cook for themselves, both men and women eat far too much carbohydrate, and their nutritional state often becomes unsatisfactory in consequence. The provision of a meals service presents many difficulties, but it is a matter well worth consideration.

Mental illness and mental deficiency cases now occupy almost half of the hospital beds in this country, and it has been estimated that about a third of all persons absent from work are absent on account of mental illness. It is true that many people who previously were absent due to sickness and whose complaint was essentially one of the mind rather than the body were not always labelled as cases of mental illness, and that now there is a greater awareness of this problem. It would appear, however, that despite this, there is a greater amount of mental illness present, and it is significant that this period of greater mental illness and strain has been associated with a slackening of the sheet anchor provided by convinced religious beliefs. It would be unfortunate if we were to reach a period when the Psychiatrist was considered as an adequate substitute for the Clergyman, and I have the impression that many minor cases of mental ill-health might have been avoided in an atmosphere of Christian fellowship.

Meanwhile, these cases do occur and it is the object of the preventive medical service to prevent them as far as is possible. Details of the work of the Mental Health Social Worker are contained in this report, and it is appropriate to mention the large amount of preventive work in this field by the General Medical Practitioner and the Health Visitor in surgery, clinic and home. We are told that scientific development may make it possible for hours of work to be cut more and more, and the emphasis of the importance of technical education to attain this end is constantly stressed. It is hoped that, side by side with this advance in technical education, the work of the secondary modern school continues to cover a wider field, and that these schools will be allowed to play their full part in the widening of general knowledge and appreciation, so that the leisure, when attained, can be properly spent

and that the appreciation of values will grow, step by step, as leisure increases.

It is noteworthy that twenty mental defectives were in regular, gainful employment, and employers have been very helpful in allowing these worthy people to make their own contribution to their own maintenance and to the country's production. The employment of mental defectives is not always easy, and it has been assisted by a period of full employment. It is hoped that in the fight against inflation, they will not be early casualties.

Television has been much criticised, but in my experience it has performed a useful function in uniting families in the home. More and more families are spending their evenings together, and in its own way television seems to me to be making a valuable contribution to the maintenance of the family circle. Its educational possibilities are great, and although it may be weakening community life, it appears to me to be helping in the maintenance of the family circle.

The vital statistics have several notable features. The birth rate of 14.4 is the highest since 1951, while the death rate has remained stable. More infant deaths have occurred than in any year since 1948, two-thirds of these deaths occurring in the first month of life, and mainly being attributable to ante-natal causes.

The commonest infectious disease was Sonne Dysentery, a disease which has occurred with unfailing regularity since the War. Often mild in character and consisting of only slight diarrhoea, this disease is one which can be overcome by strict personal hygiene, but it is remarkably infectious.

The falling-off in Diphtheria immunisation, noted last year, has been halted, and more parents brought their children forward for immunisation. The number of children protected against Whooping Cough, too, was higher than last year.

This year we commenced vaccination against Poliomyelitis, using a vaccine in the preparation of which stringent safeguards had been introduced. Unfortunately, the supply of this vaccine was limited to the months of May and June initially, and vaccinations were not re-commenced until the end of November, after the season of maximum incidence. This led to much disappointment among many parents who regard this undoubtedly dangerous disease with an exaggerated dread. In this district there were only four cases of Poliomyelitis, three of which have no residual paralysis. It is hoped that in 1957 most of the children whose parents consented to Poliomyelitis vaccination will have received it, thus relieving their parents' anxiety – an anxiety which is out of proportion to the danger.

Included in this report is the report of Mr. W. Jennings, my new colleague in the Public Health Department, who commenced as

your Chief Public Health Inspector in November. Much of his report refers to the work carried out under the direction of Mr. C. R. Moss, who had been Chief Sanitary Inspector in this Borough for over thirty years. Much of his work was unspectacular, as, indeed, is that of any good public health official, but he was known nationally for his efforts in salvage, and he has left behind him a most efficient department. We are glad to know that in his new appointment, he will still be intimately concerned with this aspect of the work in which he took such a keen interest, and he will long be remembered in this town as a most enthusiastic and competent officer. We are fortunate in having secured, as successor to Mr. Moss, a young man who will uphold the traditions of the department.

My thanks are due to him, to the Town Clerk, and to the other officers of this Corporation for their courteous co-operation during the year, and I should like to thank you, Mr. Mayor, Mr. Chairman, Madam and Gentlemen for your unfailing encouragement.

This report is a report on the work of the staff of this department, who have continued to carry out their duties with unabated zeal.

I have the honour to be, Mr. Mayor, Madam and Gentlemen,

Your obedient Servant,

FRANK APPLETON,

November, 1957. Medical Officer of Health.

Annual Report of the Medical Officer of Health for the Year 1956

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

Area (in acres)	7,875
Population : Census 1951, 30,587. 1956 (est.)	30,490
Average number of persons per acre	3.87
Number of inhabited houses	11,259
Average number of inhabited houses per acre	1.43
Average number of persons per house	2.71
Rateable Value	£265,078
Product of a penny rate	£1,054

A total of forty-two men, two boys and twenty women were unemployed at the end of 1956. These figures include fifteen men and ten women on short-time.

During the year there has been spasmodic short-time working in the carpet and cotton manufacturing and dyeing and finishing industries. All other industries have been working full time, and in some cases overtime has been worked.

I am indebted to the Manager of the Local Employment Exchange for this information.

EXTRACTS FROM VITAL STATISTICS FOR THE YEAR

Live Births —	M.	F.	Totals
Legitimate	229	184	413
Illegitimate	16	9	25
Total	245	193	438

Live Birth Rate : 14.4 per 1,000 of estimated resident population.

Still Births —	M.	F.	Totals
Legitimate	1	6	7
Illegitimate	—	—	—
Total	1	6	7

Still Birth Rate per 1,000 total (live and still) births : 15.73.

Deaths —	M.	F.	Totals
	201	194	395

Crude Death Rate : 13.0 per 1,000 of estimated resident population.

Adjusted Death Rate : 12.0 of estimated resident population.

Deaths from Maternal Causes —	Deaths	Rate per 1,000 total (live & still) Births
Peurperal Sepsis	—	—
Other Maternal Causes	—	—
Total	—	—

Death Rate of Infants under one year of age —	
All Infants per 1,000 live births	32.0
Legitimate Infants per 1,000 legitimate live births	31.5
Illegitimate Infants per 1,000 illegitimate live births	40.0
Neo-natal deaths per 1,000 live births	20.5
Deaths from Diseases of the Heart and Circulation (all ages)	174
Deaths from Cancer (all ages)	47
Deaths from Measles (all ages)	—
Deaths from Whooping Cough (all ages)	—

TABLE 1

BIRTH AND MORTALITY RATES FOR 1956 FOR THE WEST RIDING ADMINISTRATIVE COUNTY AND ENGLAND AND WALES

	Aggregate of U.D.'s	Aggregate of R.D.'s	Administrative County	England and Wales	Brighouse
Crude Birth	15.8	17.7	16.4	15.7	14.4
Adjusted Birth ...	16.0	17.9	16.5	15.7	15.2
Crude Death	12.6	9.8	11.8	11.7	13.0
Adjusted Death ...	13.1	12.0	12.9	11.7	13.0
Tuberculosis —					
Respiratory	0.11	0.12	0.11	0.11	0.16
Other	0.01	0.02	0.02	0.01	—
All Forms	0.12	0.14	0.13	0.12	0.16
Cancer	2.05	1.50	1.89	2.08	1.54
Vascular Lesions of the Nervous System ...	2.05	1.36	1.86	*	1.94
Heart and Circulatory Diseases	4.76	3.71	4.47	*	5.71
Respiratory Diseases ...	1.37	1.07	1.29	*	1.61
Maternal Mortality ...	0.69	0.12	0.52	0.56	—
Infant Mortality ...	25.9	30.0	27.1	23.8	32.0
Neo-natal Mortality ...	19.2	20.8	19.7	16.9	20.5
Stillbirth	23.5	22.2	23.1	23.0	15.7

* Figures not available.

The Infant and Neo-natal Mortality Rates are per 1,000 live births.

The Maternal Mortality and Stillbirth Rates are per 1,000 live and stillbirths.

The remaining rates are per 1,000 estimated home population.

TABLE 2

CAUSES OF DEATH OF BRIGHOUSE RESIDENTS IN 1956

	Causes of Death	1956 All Ages M.	F.	Total
1.	Tuberculosis — respiratory	2	3	5
2.	Tuberculosis — other	—	—	—
3.	Syphilitic disease	—	1	1
4.	Diphtheria	—	—	—
5.	Whooping cough	—	—	—
6.	Meningococcal infections	1	—	1
7.	Acute poliomyelitis	—	—	—
8.	Measles	—	—	—
9.	Other infective and parasitic diseases ...	—	—	—
10.	Malignant neoplasm stomach	2	5	7
11.	Malignant neoplasm lung, bronchus ...	3	1	4
12.	Malignant neoplasm breast	—	5	5
13.	Malignant neoplasm uterus	—	4	4
14.	Other malignant and lymphatic neoplasms	14	13	27
15.	Leukæmia, aleukæmia	—	—	—
16.	Diabetes	—	2	2
17.	Vascular lesions of nervous system ...	28	31	59
18.	Coronary disease, angina	48	29	77
19.	Hypertension with heart disease	3	7	10
20.	Other heart disease	27	35	62
21.	Other circulatory disease	14	11	25
22.	Influenza	—	2	2
23.	Pneumonia	10	5	15
24.	Bronchitis	13	15	28
25.	Other diseases of respiratory system ...	4	—	4
26.	Ulcer of stomach and duodenum	3	—	3
27.	Gastritis, enteritis and diarrhœa	—	3	3
28.	Nephritis and nephrosis	2	1	3
29.	Hyperplasia of prostate	3	—	3
30.	Pregnancy, childbirth, abortion	—	—	—
31.	Congenital malformations	1	2	3
32.	Other defined and ill-defined diseases ...	12	14	26
33.	Motor vehicle accidents	4	—	4
34.	All other accidents	6	3	9
35.	Suicide	1	2	3
36.	Homicide and operations of war	—	—	—
	Totals ...	201	194	395

VITAL STATISTICS

The estimate of the population of Brighouse is the mid-year estimate of the Registrar General. His estimate is 30,490, as compared with the mid-year estimate of 30,360 for 1955. He considers, therefore, that our population has increased by 130. There were 438 live births and 395 deaths, so that there was a natural increase of population of forty-three.

Birth Rate

The birth rate for the year is 14.4 per 1,000 of the population. To compare the birth rate with any degree of accuracy with that of the country as a whole, it is necessary to adjust the crude birth rate by multiplying it by the area comparability factor. Every district varies as to the distribution of population among the sexes and in age ranges. The area comparability factor is an attempt to standardise our sex and age range with that of the country as a whole. Our area comparability factor is 1.06, which means that with our present sex and age range the crude birth rate has to be adjusted upwards to bring it into line with the country as a whole, and our corrected birth rate is 15.2. This is 0.5 below the rate for England and Wales and 1.3 below the rate for the West Riding Administrative County.

There were twenty-five illegitimate births, representing 5.7 per cent of the total live births, and an illegitimate birth rate of 0.8 per 1,000 of the estimated population.

During the year there were seven stillbirths, none of which were illegitimate. This gives a stillbirth rate of 15.7 per 1,000 (live and still) births, as compared with 23.1 for the West Riding of Yorkshire, and 14.6 for this town last year.

Death Rate

The death rate for the Borough is 13.0 per 1,000 of the population, which compares with the rate of 11.7 for England and Wales and 12.9 for the Administrative County.

The chief causes of death this year were – in order of frequency :—

1. — Diseases of the Heart and Circulation – 174 (compared with 156 in 1955).
2. — Vasc. Lesions of Nervous System – 59 (compared with 74 in 1955).
3. — Pneumonia, Bronchitis, Influenza and other respiratory diseases – 49 (compared with 38 in 1955).
4. — Cancer – 47 (compared with 61 in 1955).

Infant Deaths

Fourteen children under one year of age died during the year. One of these children was illegitimate. This is five more deaths than last year, when nine children died.

The death rate of infants under one year of age per 1,000 live births is 32.0, which is the highest rate since 1948. It will be remembered that last year we had a record low rate of 22.2. It is higher than that for the West Riding Administrative County, which is 27.1, and compares with a rate for the country as a whole of 23.8.

When discussing this rate, it is necessary to remember that we are dealing with very small figures and that an increase in this rate, taken for one year only, should not be given undue significance.

Particulars of the deaths of children under one year of age are appended below, and last year's figures are given in brackets :—

5(3) under twenty-four hours (all males).
3(4) between one day and seven days (all males).
1(1) between one week and one month (male).
2(–) between one month and three months (1 male, 1 female).
3(1) between three months and nine months (2 males and 1 female).
–(–) between nine months and twelve months.

Nine of the fourteen deaths occurred within the first month of life, and our neo-natal death rate is 20.5, as compared with 19.7 for the Administrative County and 16.9 for the country as a whole.

All the children who died within twenty-four hours were born prematurely, although one of the children, who was born to a diabetic mother weighed more than five and a half pounds and was not designated as a premature child, and all three children who died within the first week were also born prematurely (one of these children died at five days of age with Broncho-Pneumonia), so that eight of our deaths occurred in premature children. Three other children died from congenital malformations. All these eleven children can be said to have died as a result of ante-natal causes and perhaps properly should be included with the seven stillbirths, making a total of eighteen children whose mortality was governed by factors occurring before birth. When we consider that only three other children under one year of age died during the year, it will be appreciated how important it is that every mother should attend regularly for full ante-natal care which can be provided either at the hospital, the local authority clinic, or by her own doctor.

Of the three remaining infant deaths, one may have been preventable. It occurred in the child of an inexperienced mother who was given almost daily advice by the Health Visitor. Her own doctor co-operated with this department, and every effort was made to help the mother in her difficulties. With two young children and barely adequate income, and little idea of management, she was helped in many ways. Her very young husband was also seen. The child, who had been quite well, developed Pneumonia and the doctor was called in at too late a stage of the illness, and only after the Health Visitor's advice. The second child died of a fulminating attack of Meningococcal Meningitis. The third case was a very sad one, where the child, who was well-cared for and seven months of age, died from

Cerebral Haemorrhage, accidentally sustained by striking its head on the side of the pram. This reminds us, once again, of the important part home accidents play in the deaths and disablements of young children, and stresses the importance of properly-upholstered perambulators.

In Table 3 particulars of the causes of deaths and the age of death are given.

TABLE 3

CAUSES OF INFANTILE MORTALITY IN BRIGHOUSE BOROUGH, 1956

Cause of Death	1 day and under	2– 7 days	7–14 days	14–21 days	21–28 days	1– 3 months	3– 6 months	6– 9 months	9–12 months	Total
Accidental Death	—	—	—	—	—	—	—	1	—	1
Prematurity	5	2	—	—	—	—	—	—	—	7
Congenital Malformations	—	—	—	1	—	1	1	—	—	3
Broncho-Pneumonia	—	1	—	—	—	—	1	—	—	2
Meningococcal Meningitis	—	—	—	—	—	1	—	—	—	1
Totals ...	5	3	—	1	—	2	2	1	—	14

Premature Births

There were twenty-one children born prematurely during the year. Seven of these were born at home, five of whom survived. Nine of the fourteen children born in hospital survived. A further child, who was not designated as a premature birth, but was born prematurely, is referred to in the preceding paragraph.

A table is appended giving details of the premature births.

TABLE 4

TABLE SHOWING BIRTH WEIGHTS OF PREMATURE INFANTS

Domiciliary Confinements

Birth Weight lbs.	Birth Weight ozs.	No. of Infants	No. of Infants who survived		
			24 hours	1–7 days	1 month
5	8	1	1	1	1
5	6	1	1	1	1
5	4	1	1	1	1
4	2	1	1	1	1
3	8	1	1	1	1
1	13	1	—	—	—
1	12	1	1	—	—
Totals ...		7	6	5	5

Institutional Confinements

Birth Weight lbs.	Birth Weight ozs.	No. of Infants	No. of Infants who survived		
			24 hours	1–7 days	1 month
5	7	1	1	1	1
5	6	1	1	1	1
5	4	2	2	1	1
5	0	1	1	1	1
4	14	1	1	1	1
4	11	1	—	—	—
4	10	1	1	1	1
4	6	1	1	1	1
3	15	1	1	1	1
3	9	1	1	1	1
3	7	1	1	—	—
3	6	1	—	—	—
2	8	1	—	—	—
Totals ...		14	11	9	9

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

Laboratory Facilities

The Public Health Laboratory, Wakefield, continues to receive clinical material and water samples for bacteriological examination, while chemical analysis is carried out by Messrs. F. W. Richardson and A. Jaffe, Bradford, the County Analysts.

Divisional Ambulance Service

I append below particulars of the cases transported during the year. The figures are given monthly, and the total for last year is appended in brackets after the total in each line. This table applies, of course, to the whole Division. It has not been possible to split the Divisional figures to give the figures for Brighouse alone.

TABLE 5

WEST RIDING COUNTY COUNCIL AMBULANCE SERVICE — BRIGHOUSE DEPOT

Statistical Return for the period January to December, 1956

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total	
1. Patients														
(a) Admissions	181	183	183	171	159	176	141	152	143	144	170	170	1973	(1961)
(b) Discharges	73	74	68	46	62	51	62	46	40	56	57	71	706	(734)
(c) Transfers	19	14	17	11	13	22	22	10	11	18	13	13	183	(213)
(d) Out-Patients	1180	1117	1280	963	1175	1064	956	938	906	983	1008	881	12451	(12326)
(e) Accident Patients	38	29	39	30	57	53	39	55	41	60	59	64	564	(502)
Total No. of Patients	1491	1417	1587	1221	1466	1366	1220	1201	1141	1261	1307	1199	15877	(15736)
2. Analysis of Patients														
Male	632	641	680	555	535	511	506	519	478	526	588	506	6677	(6418)
Female	859	776	907	666	931	855	714	682	663	735	719	693	9200	(9318)
Stretcher	293	369	349	287	240	238	217	187	187	255	233	248	3103	(3477)
Sitting Case	1198	1048	1238	934	1226	1128	1003	1014	954	1006	1074	951	12774	(12259)
Child	87	64	90	66	90	99	81	56	66	83	83	58	923	(682)
Baby	5	11	11	9	13	13	3	2	9	7	5	6	94	(181)
3. Further Analysis of Total Patients in Part 1 above less (d) and (e)														
Urgents	94	93	81	82	88	81	76	75	80	76	92	95	1013	(990)
Maternity	25	29	29	26	25	22	15	22	25	23	22	25	288	(353)
Infectious	14	9	7	5	3	2	7	1	1	—	1	5	55	(72)
Mental	5	5	2	3	2	4	5	6	4	1	1	3	41	(24)
General Patients	135	135	149	112	116	140	122	104	84	118	124	126	1465	(1469)
4. Journeys	369	345	373	317	401	361	337	316	328	352	381	374	4254	(4120)
Miles	9881	9493	9850	8461	10413	9431	8935	7792	7697	9515	9477	8937	109882	(108711)

(The totals in brackets are last year's figures)

Nursing in the Home

Altogether 10,981 individuals visits were made to patients and 522 new cases were treated during the year.

Full collaboration has been maintained with the hospital service and with the General Medical Practitioners under whose direction the District Nurses work. Individual Doctors have assured me that the standard of district nursing in this Borough is very satisfactory.

Home Helps

The trend of a rising demand for Home Helps has continued. The hours worked this year are equivalent, approximately, to fifteen Home Helps working a forty-four hour week with two weeks annual holiday.

If every case in which a Home Help was requested, or other cases in which a Home Help is necessary, were provided with home help to optimum requirements, it is estimated that the required establishment would be the equivalent of over forty Home Helps, but with the continued opportunities for employment of women in this textile area, we are always running the service with a shortage of personnel. This means that a great deal of thought and work goes into the service. Cases have to be assessed on their merits and Home Helps have to be taken away from the less urgent cases to the more urgent ones. Old people in particular become very attached to a Home Help and it is unfortunate when we have to transfer the Home Helps from one case to another but with the labour available this has to be done.

At the beginning of the year, 123 domestic cases and three maternity cases were being attended, 108 of the domestic cases being old people. During 1956, there were eighty-three new domestic cases, sixty-eight of these being for old people. Thirty-two new maternity cases were attended, four having to continue the services of the Home Help well into the post-natal period, and two requiring help ante-natally. A Home Help was also provided in seven cases for post-natal care only. At the end of the year, one maternity case and 144 domestic cases were being attended. One hundred and thirty-three of these were for old people. At the end of December, 1956, we had forty-three Home Helps working part-time in Brighouse and the total number of hours worked in Brighouse during 1956 was 33,014. This figure compares with a figure of 32,219 for 1955.

Clinics and Treatment Centres

The Table of Clinics and Treatment Centres is appended.

There is a need for an additional clinic in the Rastrick area, especially now that so much building has taken place on the Field Lane Estate. The Ogden Lane Day Nursery, which has been closed since November, 1954, is a building which could be adapted to form

satisfactory clinic premises for Rastrick, and this project has been put before the County Council. Except that the residents at Field Lane Estate have to cross the road, the premises are well situated. Although there is a bus service, the present centrally situated clinic in Huddersfield Road is no longer suitable for people who have moved out to Field Lane. Pushing a pram from the centre of the town to the Field Lane Estate is a severe test of physical fitness, and it is hoped that progress on the provision of the new centre will be made during the year 1957.

TABLE 6 — CLINICS AND TREATMENT CENTRES

Name.	Situation.	When Open.
Child Welfare Clinic	Huddersfield Road	Wednesdays, 2–4 p.m. Thursdays, 2–4 p.m.
do.	Wesleyan School, Hipperholme ...	Mondays, 2–4 p.m.
do.	St. Annes-in-the-Grove, Southowram	Thursdays, 3–4 p.m.
Combined Ante-Natal and Post-Natal Clinics	Huddersfield Road	Tuesdays, 2–4 p.m., fortnightly.
do.	Wesleyan School, Hipperholme ...	Fridays, 2–4 p.m., fortnightly.
do.	St. Annes-in-the-Grove, Southowram	Thursdays, 2–3 p.m.
Artificial Sunlight Clinic	Brook House, Atlas Mill Road ...	Mondays, 10.15 a.m. Thursdays, 1.45 p.m.
do.	Wesleyan School, Hipperholme ...	Mondays, 10.30 a.m. Fridays, 9.30 a.m.
do.	St. Annes-in-the-Grove, Southowram	Mondays, 2 p.m. Thursdays, 10.30 a.m.
*Diphtheria and Whooping Cough Immunisation Clinic	Huddersfield Road	By appointment.
Vaccination Clinic	Huddersfield Road	By appointment.
do.	Wesleyan School, Hipperholme ...	By appointment.
do.	St. Annes-in-the-Grove, Southowram	By appointment.
Minor Ailments Clinic	Brook House, Atlas Mill Road ...	Every weekday at 9.30 a.m.
do.	Wesleyan School, Hipperholme ...	Mondays, 9.30 – 10.30 a.m.
do.	St. Annes-in-the-Grove, Southowram	Mondays, 9.30 – 10.30 a.m.
Dental Clinic	Bonegate House, Bradford Road ...	By appointment.
Remedial Exercises Clinic	Brook House, Atlas Mill Road ...	Tuesdays, 10 a.m.
Ante-Natal and Post-Natal Exercises Clinic	Brook House, Atlas Mill Road ...	Tuesdays and Wednesdays, 2 p.m.
Tuberculosis Dispensary	Royal Halifax Infirmary	Mon., 9.15 a.m. to 12 noon and 1.30 to 3.30 p.m. Tues., 9.15 a.m. to 12 noon. Wed., 9.15 a.m. to 12 noon and 2.30 to 4 p.m. Thurs., 9.15 a.m. to 12 noon and 1.30 to 3.30 p.m.
Venereal Diseases Clinic	Royal Halifax Infirmary	Males: Thurs., 2.30 – 4.30 p.m. and 5 – 7 p.m. Females: Tues., 2.30 – 4.30 p.m. and 5 – 7 p.m.
do.	York Place, New North Road, Huddersfield	Mon., 2–4 and 5–7 p.m. Wed., 10 a.m. – 12 noon and 2–4 p.m. Fri., 2–4 and 5–7 p.m.
Consultant Clinics, Ear, Nose and Throat, Ophthalmic & Orthopædic	Brook House, Atlas Mill Road ...	By appointment.
Orthoptic Clinic	Brook House, Atlas Mill Road ...	Bi-weekly (by appointment).
Psychiatric Clinic	Brook House, Atlas Mill Road ...	Tuesdays, 2 or 6 p.m.

* This is also carried out at the ordinary Child Welfare sessions.

MATERNITY AND CHILD WELFARE

Health Visitors

I have commented fully on the work of the Health Visitor in previous reports. This field worker is essentially a home visitor and she is usually the first person, except perhaps for the family doctor, to appreciate early signs of family illness or disharmony or trouble. Over the years she becomes a real family friend, always available to give necessary advice and guidance. It is essential that she works hand in hand with her nursing colleagues, the Home Nurse, and the Midwife, and with Home Help and Hospital staffs, and, above all, with the Family Doctor. The value of her work has become widely recognised but it is in the home – and in the humblest of homes – that it is most valued.

It is impossible to give concrete evidence of ills that are averted, and we do not know how many home accidents, how many broken marriages, how much chronic sickness and how much human unhappiness is prevented by these ladies who undertake this work. Her work is, of course, educational, but the education she gives is by no means general. In some cases she has to advise young mothers on food and diet, household management and amateur dressmaking. She has to reassure and give encouragement to the diffident and anxious. She has to stimulate and admonish the slack and apathetic. She has to try to assess the cause of family lack of care and to decide whether slackness is due to ill-health, or whether ill-health results from slackness. She must encourage and stimulate but give firm advice on necessary occasions. Although her work in the clinics is important and the group training she can give is much appreciated and has its value, it is in the home, under the conditions that belong there, that she does her best work.

She has been encouraged very much recently by the increasing awareness by the general medical practitioners of her useful help, and the work of the old people's clubs has saved her much visiting among the able-bodied, older folk. The gradual but definite improvement in the general standard of family care has recently been accelerated. Along with the contributions made by better economic conditions, better education, smaller families, and the free medical services provided by the National Health Service, the contribution of the Health Visitor to the improvement of home and family life ranks very high.

The most senior of our nurses, Miss A. D. Anderson, retired in April. Miss Anderson has given sterling service. Her work has been principally with the school health service and Miss Anderson has known more than one generation of schoolchildren. I have found her experience of great value, knowing, as she does, the many intimate and personal details about the families whose children have come under her care. During recent years, her health has not been very good, but we wish her a healthy and happy retirement.

TABLE 7

Visits paid by Health Visitors in 1956

First visits to children under 1 year	397
Subsequent visits to children under 1 year	2,597
Visits to children 1 to 5 years	3,266
Visits to expectant mothers	48
Miscellaneous	2,664
Total ...	8,972

Ante-natal Clinics

Table 8 gives particulars of the attendances at the ante-natal clinics. One hundred and twenty-nine confinements took place at home and 162 new expectant mothers attended our ante-natal clinics. In addition, twenty-nine expectant mothers attended who were also attending last year, making the total of individual mothers attending 191. These mothers made 694 attendances, so that the total attendances work out at about four per patient. Many of the patients attend their own Doctor as well as the clinic. Some of the mothers, too, who attend our ante-natal clinics and are being delivered in hospital, also attend the hospital ante-natal clinic at certain prescribed times.

TABLE 8

Attendances at Ante-natal Clinics

	1952	1953	1954	1955	1956
Number of sessions	119	104	102	102	104
Number of new expectant mothers	124	133	137	126	162
Total number of individual expectant mothers	176	163	173	168	191
Total number of attendances	731	615	651	651	694
Average number of patients per session ...	5.41	5.91	6.38	6.38	6.67

Relaxation Clinics

The Relaxation Clinics continued to be appreciated, and clinics have been held twice weekly at Brighouse and fortnightly at Hipperholme. At Hipperholme, the Midwife delivering the patient takes the Clinic but at Brighouse the Clinics are taken by a Midwife who has concentrated and specialised in this work. I have no doubt that a midwife who has some training in Physiotherapy is an ideal person

for this type of work, particularly if she has a flair for group teaching, and Mrs. Hepworth, the Midwife in charge of this Clinic, is particularly gifted in this respect. During the year she supplemented her knowledge by a teaching qualification.

It would appear, superficially, that the midwife delivering the patient is the best one to give the instruction, but in practice this does not work out so well, for she cannot be depended upon always to be at the Clinic when the patients attend, due to delivery calls, and midwives are not uniformly good instructors. All our midwives, however, have worked in co-operation with the Relaxation Clinics and are very happy with our present administration.

The mothers are also happy, and an average of over nine attendances were made at the Relaxation Clinic by the expectant mothers attending. Of the mothers attending, none had to have instrumental deliveries, but one mother had a Caesarian section for uterine inertia. In most cases, including this one, breast feeding was established. Many mothers who had attended classes previously, attended for their second and third babies during 1956, and several of them found their way to the Clinic uninvited.

Letters received show that very few mothers have found labour very difficult, and the average length of time in labour by women attending this clinic for their first babies was about six hours.

Unfortunately, most of the mothers do not attend post-natally. As the lady in charge of the clinics remarks, "Mothers seem to be reluctant to give time to themselves, once their baby is born." For this reason, an opportunity has been taken of teaching post-natal exercises to the mothers before delivery. All those delivered at home are also given post-natal exercises by the midwives.

I wish mothers would attend post-natally, but, unselfishly, their baby and their home seem to be their first considerations.

Post-Natal Clinics

Our post-natal clinic is held at the same time as the ante-natal clinic, so that the mothers who are used to attending during pregnancy continue to do so and to see the same Medical Officer. Many women now, however, very properly receive their post-natal care from their own Doctor and all the women delivered at home had a post-natal examination either at the clinic or at their own Doctor's surgery. Most of the patients delivered in hospital attended at the hospital for post-natal examination. Altogether only twenty-two women attended the clinic for post-natal examination.

Domiciliary Midwifery

The trend towards hospital confinement, which has been commented on from year to year, was halted in 1955, when, for the first time, there were more domiciliary confinements. This year, too, there has been another slight increase in births at home. Even so, two-

thirds of the births still take place in hospital and the average number of confinements conducted by each midwife is forty-two.

It will be appreciated that if the number of confinements had continued to fall, it might have been necessary to give the midwives larger areas and reduce the number of midwives. This was a measure we were most reluctant to take.

I believe, providing the confinement is normal, the best place for a baby to be born is in its own home. The process is a natural one and the place for a baby is in the bosom of the family. Particularly is it desirable for second and subsequent babies to be born at home. The arrival of the mother, along with a little stranger to whom she devotes a great deal of the attention previously given to the older child, may result in behaviour problems. We do not usually find this trouble when the babies are born at home.

The work done by the Midwives is set out in Table 9 below. Two additional labours were carried out by private midwives, acting as maternity nurses.

TABLE 9

Work done by the Midwives during 1956

Labours conducted :	(a) as midwives	127
	(b) as maternity nurses	—
Ante-natal visits ...	... ...	1,217
Post-natal visits ...	... ...	2,385

Dental Scheme

During the year, thirty-eight expectant mothers were referred for treatment, and treatment was completed in thirty cases.

INFANT WELFARE CENTRES

The work of the respective clinics is set out in Table 10 which follows.

TABLE 10

Attendances at the respective Infant Welfare Clinics in 1956

	Huddersfield Road	Hipperholme	Southowram	Totals
Number of Sessions	102	51	52	205
Individual Children attending ...	349	258	118	725
Children attending for the first time	203	77	78	358
Medical Consultations	1046	582	347	1975
Average number of medical consultations per session	10.25	11.41	6.67	9.63
Attendances of children under 1 year	2486	1272	1005	4763
Attendances of children over 1 year	785	387	415	1587
Total attendances	3271	1659	1420	6350
Average attendances per session ...	32.07	32.53	27.31	30.98
Highest attendance at one session	65	51	49	

It will be seen that there have been less individual children attending the clinics than in previous years. This would appear to be due to the difficulty mothers living in the new Field Lane Estate find in pushing perambulators up the steep approach. The Health Visitors, in consequence, have had to visit more regularly on this Estate. The actual number of attendances shows an increase, however, and is evidence that there is no falling-off in maternal care.

Voluntary Helpers

Once again, I pay tribute to the voluntary helpers who have continued to give their willing service in our clinics. Their help in selling food and in registration has enabled the Health Visitors to spend more time on their important duties of advising the mother on the care of her child.

During the year we lost the services of Mrs. Brooke, who had known more than one generation of mothers.

Welfare Foods

We have continued to be responsible for the sale of welfare foods, all these foods being sold voluntarily, except at the central distribution point in the Public Health Department. There was a slight falling-off in demand for National Dried Milk. The distribution of both orange juice and cod liver oil was also reduced. It is noteworthy that cod liver oil sales tend to improve in the winter, and orange juice during the hot weather. The only increase was in

Vitamin A and D tablets issued for expectant mothers. It is gratifying to know that more mothers are now taking up their entitlement of these valuable food accessories.

During 1956, 7,482 tins of National Dried Milk, 3,275 bottles of cod liver oil, 19,284 bottles of orange juice, and 1,736 packets of Vitamins A and D tablets were issued.

Artificial Sunlight Treatment

The work done is set out in Table 11 which follows, and it will be seen that thirty children received 282 exposures.

TABLE 11

The work of the Artificial Sunlight Clinics during 1956

	Brighouse	Hipperholme	Southowram	Total
Number of children treated ...	24	4	2	30
Number of exposures	196	78	8	282

Orthopaedic Treatment

During the year, twenty-eight children under school age were examined by the Orthopaedic Surgeon. Particulars of these cases are appended below :—

Congenital Deformities	7
Genu Valgum	9
Deformity Toes	5
Inversion Foot	4
Pronation Foot	2
Hemiplegia	1

Ophthalmic Scheme

During 1956, sixteen pre-school children were examined at the Ophthalmic Clinic, all suffering from Strabismus, and spectacles were prescribed in nine cases.

WELLHOLME PARK DAY NURSERY

It has been my duty to report on three day nurseries until this year, when only one was in operation, the one at Wellholme Park. This nursery has now had almost fifteen years' life and the need for it still remains. The emphasis now, however, is on social need rather than industrial need, and children are only admitted where the mother is the principal support of the family for one reason or another, or where the mother is temporarily incapacitated or absent from home. We still receive applications from parents who are unable to manage on one income, particularly from young parents, where the husband is not yet earning a large wage and where the wife and mother has not yet gained sufficient experience in household management to manage on her husband's income.

In addition to Brighouse children, children have been accepted from within the Division, and in a few instances from outside the Division but within the County area. Children have also been admitted as short-stay cases where the mother was suffering from physical or mental illness. In one instance, where husband and wife separated, we were able to bring the children together in the Nursery, as we admitted both the child the mother had taken with her and the two children she had left at home with her husband. Subsequently, reunion of this family was achieved, and the Nursery helped to maintain continuity in family life.

Every case is gone into carefully on its merits, and the Nursery is now fulfilling a most useful social service. The average number of attendances, however, has fallen considerably, and there is now no waiting list, although if the Nursery were thrown open to admit all the children of mothers who go out to work, once again a large waiting list would appear. The average daily attendance throughout the year has been twenty-three, and the average number on the register has been thirty. In consequence of the reduced number, the staff was reduced by two.

In considering the average attendance, it should be pointed out that, in January of this year, a serious epidemic of Sonne Dysentery occurred, and this resulted in a considerable reduction of the numbers attending in January and February. Although this epidemic was serious from the point of view of attendances, the children were not generally seriously ill. Just before Christmas, 1955, we had several cases of mild Diarrhoea in the Nursery. It was suspected that these might be caused by Sonne Dysentery, for, year by year, since the War, in the winter months, cases of Sonne Dysentery have occurred, particularly in the Rastrick area. The disease in generally mild in character, and many persons, who have a mild Diarrhoea, of perhaps only one or two days' duration, do not even call in a doctor, so that the true incidence of the disease is probably much greater than is represented by the notifications. The organism was isolated from specimens submitted to the Laboratory, and, immediately, specimens were taken from all the children and staff of the Nursery.

Altogether, the organism was isolated from thirty children, out of a total of forty-one, and from five members of the staff, out of a total of eleven. Most of the children were not ill, and five had no symptoms whatsoever. Of the members of the staff, only one had any symptoms. The organism was not found in the stools of one child who had diarrhoea. One of the members of the staff commenced duty during the epidemic, and a specimen was taken from her on her first day. The organism was found, so that it appeared probable that she had been infected outside the Nursery. She had no symptoms of illness, and was a symptomless carrier.

There is no doubt of the possible danger of this usually mild disease when it affects young children, and children were excluded from the Nursery until three consecutive negative specimens had been obtained. The epidemic did not originate in the Nursery, and from our investigations it appeared probable that many persons in the community were acting as symptomless carriers of the disease.

Strict precautions were taken in the Nursery from the onset of the first case of diarrhoea. Lavatory seats were regularly cleansed by means of disinfectant ; toys were thoroughly disinfected, and special care was taken with the floors of the Nursery. Any child with positive stools, or with the slightest symptom of looseness of stools, was immediately isolated. Despite this, three-quarters of the children and half the staff contracted this disease, which is some measure of its great infectivity. The epidemic is further discussed in the section on Infectious Diseases.

Apart from Dysentery, the Nursery was singularly free from infectious diseases, only four cases of Mumps occurring.

MENTAL HEALTH

Mental Health Preventive Service

On the 28th June, 1955, a psychiatric clinic was established in the Division. It was felt that there was a good deal to be said for the establishment of such a clinic in a building devoted to the service of preventive medicine and positive health.

In the doctors' surgeries and the child welfare centres, in the schools and in the home, general practitioners and health visitors meet many cases of minor mental ill-health, some of which only need a word of encouragement. Health Visitors, in their regular visits to homes, not only treat the family's physical condition but often help with problems which, if neglected, lead to mental ill-health. The provision of psychiatrists to deal with all cases of minor mental illness would be impossible and would not be desirable. The bottle of medicine has been much criticised as being very expensive, and it has been said that this nation is becoming a nation of medicine drinkers. It is true that in some cases the confidence the medicine gives is of more value than the drugs it contains. This confidence comes from the family doctor and confidence in him has not been impaired by the National Health Service. It may be that the practical help of a bottle of medicine sometimes is of more benefit than mere words. The Health Visitor has no such aid to give point to her educational efforts but in her regular visits to homes, she has an excellent opportunity of noting early signs of physical and mental ill-health, which are often inter-dependent. A tired mother, who is over-anxious, may have a primary physical disability and when this is put right she can once again face up to her problems with equanimity, but perhaps more often the mental attitude precedes the physical condition.

It can be very hard for a woman who is struggling to maintain her home and her children without great physical reserves if she feels she is not receiving the help and stability she requires from her husband. During an inflationary period, when the cost of living, and particularly the cost of household necessities, rises steadily, it is not always apparent to the husband and father that a rise in wages should be passed on very largely for the maintenance of the home. It is also not taken for granted that a women as well as a man requires certain periods of relaxation. Small family differences can be magnified when the health of a person is below normal. Children very soon detect difficulties at home. Sometimes they do not wish to detect them and go to extraordinary lengths to prevent themselves doing so.

It may be that we are more conscious of the importance of satisfactory mental health than we used to be, but it does appear that there are more cases of difficulty where we can be helpful. The Health Visitor is able to help the Medical Practitioner in a knowledge of his patients and she in turn can receive much useful knowledge from the Family Doctor. Gradually, these two complementary

services are coming closer together, and as they do so, so more will be able to be done for the preservation of mental as well as physical health.

The work at the Child Welfare Centres in the prevention of mental ill-health by advice on social circumstances, recognition of the early signs of conflict, and comfort in anxiety, seems to be very different from the work of earlier years. Then we were dealing mainly with dirt, disease and neglect. Now we often have to deal with over-anxiety. The regular weighing of babies is still a useful provision, but it has become so generally accepted that in the case of a minor loss of weight reassurance often has to be employed as mothers are now very health conscious.

Schoolchildren have generally been referred to the Child Guidance Service during the year but at the end of the year, when this Service had become over-burdened, individual schoolchildren were referred to our Psychiatric Clinic. Although it has not been necessary to refer many cases of minor degrees of mental ill-health met in the day-to-day work of the Health Visitor, the backing of the Psychiatric Clinic and the knowledge that behind the Health Visitor is a Mental Health Social Worker and a Psychiatrist, has been a great source of strength.

Dr. Atkinson, the Assistant County Medical Officer, who has assisted Dr. Crotty, the Consultant Psychiatrist, at the Clinic, has gained a great deal from this association, and she has been able to see cases at the ordinary child welfare and school clinic sessions, many of whom it has not been found necessary to refer to the Child Guidance Service nor to the Psychiatrist. It is considered that we should proceed on these lines. The earlier we can see cases and prevent them from developing into frank mental ill-health, the more we can fulfil our duty as a preventive mental health service. The other part of a mental health service, that of helping people to attain positive mental health, is, of course, a regular part of the duties of the Health Visitor and of the School Nurse, but it is contributed to by all the services, both of voluntary bodies and of local authorities, which improve the social circumstances of the home, and high on this list must appear the work of the Housing Committee of the local authority, the work of the schoolteachers, the National Assistance Board, and all the many voluntary clubs for old people. Employers, too, by making good working conditions, and the Welfare Officers of the larger industrial firms contribute their share to positive health.

There appears to be some improvement in the public attitude to mental illness. A person who has been mentally ill for a short period has not always been regarded as convalescent and an object of sympathy rather than pity and as a person who is comparable with someone recovering from a physical illness. As more and more people are admitted as voluntary patients, the attitude of the public does seem to be improving and it is becoming generally acknowledged that a patient recovering from mental illness requires rather more sympathy

and help than someone who has been physically ill before they are capable of full restoration to complete health.

I believe that psychiatric clinics established within the preventive health service can play their part in inculcating within the public mind this new orientation to mental ill-health.

The Brighouse Psychiatric Outpatient Clinic

During 1956, there were eighty new cases attending our Psychiatric Clinic, and altogether 744 attendances were made. As the Clinic became longer established, more and more time was necessary, and towards the end of the year clinic sessions were extending from 2.30 p.m. to 9 p.m., and sometimes 10 p.m. Many of our patients were workers, and the evening session had become necessary, if patients were to be encouraged to continue with their work while still attending. This presented many advantages for patients who had been mentally ill, for it is a good thing to encourage patients who have been mentally ill to continue in the routine attendance at work and not to interrupt this whenever possible, and for this reason clinics have now been arranged alternate weeks for afternoon and evening sessions. This meant a great deal more work for the Mental Health Social Worker, who has undertaken it cheerfully and courageously. She has felt great benefit from having behind her this Clinic and the firm backing and advice of Dr. Crotty.

No treatment has been carried out at the Clinic. All drugs have been ordered by the patient's own doctor, and when a patient has required E.C.T. or other treatment and is able to continue as an outpatient, this has been arranged at the Huddersfield Royal Infirmary. The X-ray examinations have been arranged through the Halifax Royal Infirmary.

The number of cases admitted to Hospital from the Clinic is fifteen, fourteen of these being voluntary admissions. Only one was a certified case.

We have unfortunately received a considerable proportion of patients who had advanced mental illness. It was not originally intended that these cases would form any large proportion of the work of this Clinic, but it is inevitable that a certain number be of this character. There is no doubt that the patients have appreciated attending a building which is not primarily concerned with the treatment of disease.

All cases seen at the Clinic have been sent with the consent of the Family Doctor and with his co-operation.

The report of Dr. Crotty, the Psychiatrist, on the work of this Clinic during 1956 is appended below.

"During the past year the Clinic seems to have become firmly established. Referrals have been steady, and have in some cases been made by family doctors on the initiative of the patients themselves, due to their having heard of the Clinic and its accessibility, from others. Psychiatric cases inevitably pile up when any serious

attempt at Psychotherapy is made, with the result that we have now rather too many patients.

The majority of referrals consist of new cases. There has, however, been an increase in the number of follow-ups. Of children under school age we have had none this year, but we have had a number of school children. Those, needing play therapy, are at present seen by Dr. Atkinson, of the Divisional Health Department, since Dr. Leese, the County Child Psychiatrist, is already burdened sufficiently at Mirfield. In addition, Dr. Atkinson also deals with a number of the adults. I could wish that she saw more, but have been unable to work out a satisfactory method of distribution so far. (Any problems she has are discussed and this arrangement is working successfully). The rapidity with which she has absorbed psychiatric methods of investigation and management makes her an increasingly useful member of the team.

Miss Wroe, the Mental Health Social Worker, continues to take histories of cases referred, to visit homes, employers, etc. where indicated, and to deal with the laborious matter of the appointments.

Laboratory investigations are carried out by the County Laboratory, while the Radiologist at Halifax is most obliging where radiology is required.

The atmosphere of the Clinic continues to be pleasant, even when there is the strain of having to deal with too many people in too short a time.

Once again I must thank the Divisional Medical Officer, Dr. Appleton, for his constant helpfulness."

Mental Deficiency

Regular visits were made by the Mental Health Social Worker to all defectives in the area who are under supervision. The figures given in this report are for the whole Division ; it has not been thought desirable to split them up into different districts. The number of defectives under supervision at the 31st December, 1956, was as follows :—

Statutory Supervision	
Males under 16 years of age	14
Females under 16 years of age	11
Males over 16 years of age	18
Females over 16 years of age	17
Under Guardianship	
Males over 16 years of age	—
Females over 16 years of age	1
Voluntary Supervision	
Males over 16 years of age	4
Females over 16 years of age	1

It will be seen that sixty-six defectives (twenty-two male and nineteen female adults and fourteen male and eleven female child-

ren) were under some form of supervision. Eleven defectives (six males and five females) were placed on the Register during the year, and eleven were removed (three males and eight females). One male and two females left the district ; two males and five females were admitted to institutions, and one female married.

The following are the particulars of adults under supervision at the end of the year :—

Nineteen defectives were in regular, gainful employment (thirteen males and six females), six males being employed in the textile industry, four as labourers and two as farm labourers, the remaining male working for his father. Of the females, four were employed in the textile industry and two on laundry and domestic work. Eight female defectives were occupied at home in household tasks and handwork. Three defectives (one male and two females) are suffering from crippling defects which prevent their employment, and another nine defectives (six males and three females) do not follow any occupation. Two males over sixteen attend Industrial Centres.

Of the twenty-five children, one male is in gainful employment as a textile worker and three males are still at school. Thirteen (five males and eight females) attend the Group Training Class at Waring Green Community Centre and four (two males and two females) attend Westwood Occupation Centre. Four defectives (three males and one female) are unable to follow any employment.

Group Training Class

The Group Training Class which was established in 1952 is continuing to do excellent work, and will form the nucleus of the occupation centre, when it is opened early in 1957. The adaptation of the Holme House Day Nursery is well advanced, and we hope very soon to have established an occupation centre in the area. We shall then be able to bring in the children from Westwood, and other children, as transport will be provided. It is hoped that there will be accommodation for approximately thirty children, and this will meet the entire needs of the area for children and female adults. The number of male adults would not justify the opening of an industrial centre, and it is expected that any young male adults who require an industrial centre will continue to attend the Centres in the neighbouring County Borough.

The Duly Authorised Officer, Mr. Johnson, has given me the following report on his work in the Brighouse Borough during 1956 :—

Persons removed as certified patients to Mental Hospitals under Section 16, Lunacy Act, 1890	8
Persons removed under Section 20, Lunacy Act, 1890	2
Persons removed under Section 21, Lunacy Act, 1890	4
Persons assisted in obtaining admission to Mental Hospitals as voluntary patients under Section 1, Mental Treatment Act, 1930	1

SANITARY CIRCUMSTANCES IN THE AREA

Water Supply

Of the 11,364 houses in the Borough, 11,279 are on the public supply, which has remained satisfactory as regards quantity and quality throughout the year. With the exception of six houses supplied by standpipe, all those on public supply receive water directly to the houses. The remaining houses have private supplies derived from springs and wells, the majority of which are frequently contaminated by animal pollution. An examination of private water supplies showed that these were generally unsatisfactory and that the only safe way for people with private supplies from shallow wells is for the water to be boiled. It is unlikely that any great improvement in this position will be made in the near future, as most of the houses and farms not on public supply are remote from any public water main or service. Examinations for plumbo solvency were all satisfactory.

The Lands Reservoir at Rastrick is an open reservoir, which is supplied with water from Halifax and has a capacity of 250,000 gallons. Originally this reservoir served as a catchment reservoir, but owing to the dangers of pollution this was discontinued some years ago, and as the reservoir was open, chlorination was undertaken. Of recent years, the amount of water has been insufficient, and the Council have taken the opportunity of building an up-to-date reservoir, capable of holding 750,000 gallons, which will be closed. Further chlorination will not be required then. The first sod of this reservoir was cut by Alderman Whiteley, Chairman of the Water Committee, and it is hoped that the reservoir will be available for use during 1957.

I am informed by Mr. Lawson, the Water Engineer, that the following extensions and replacements of main were carried out during 1956 :—

Extensions of main —

13 yards of 3" main, Rookes Mount, Norwood Green.
73 yards of 4" main, Lyndhurst Avenue, Brighouse.
160 yards of 4" main, Mayfield Avenue, Bailiff Bridge.
163 yards of 3" main, The Avenue, Lightcliffe.
60 yards of 3" main, Deep Lane, Clifton.
59 yards of 6" main, Industrial Estate, Brighouse.

Replacement of main —

436 yards of 6" and 4" main, Bradford Road, Bailiff Bridge.
105 yards of 3" main, St. John Street, Rastrick.

Drainage and Sewerage

The requirements for drainage and sewerage in this area were very adequately dealt with in a Sewer Survey which was published by the Borough Engineer eight years ago.

I am informed by the Borough Engineer that the actual work carried out in 1956 was as follows :—

A new length of 27" to 21" diameter combined sewer was laid up Tofts Grove and Delf Hill to the junction of New Hey Road, Rastrick.

The Queens Road area of Norwood Green, the east end of River Street, and various parts of Southowram, are still not connected to the sewer. A new sewer is planned to take the Queens Road area at Norwood Green. This sewer will pass down the valley from Stockhill Bridge to Rookes Mount, and will take sewage from Shelf at present going to the Wood Fall Sewage Works, thus removing any pollution which may occur to Wood Fall Beck. This Beck afterwards becomes Coley Beck, and specimens of water taken both above and below Stockhill Bridge have shown heavy pollution. This stream is, during the summer months, a favourite children's playground, and is polluted by the existing foul drainage outlet at Stockhill Bridge and further discharges into Coley Beck a hundred yards downstream. In addition to eliminating this pollution, it is possible that some of the houses in the Queens Road and Spring Gardens area, now included in our slum clearance programme, could be made fit for a period of years, if only main drainage were possible, and for these reasons, we were very pleased when the Council decided to proceed as early as possible with this drainage scheme.

Rivers and Streams

The Yorkshire Ouse River Board is the supervising Authority. No complaints regarding the pollution of any streams in the area were received by the Health Department during the year.

Sanitary Inspection of the Area

The work done during the year is set out in tabular form in the Chief Public Health Inspector's Report.

Smoke Pollution

1956 saw an important step forward in our work of smoke abatement. The Clean Air Act became law in July, and regulations were issued, bringing portions of the Act into operation at the end of the year. We hope that these new powers will enable us to make substantial progress in the work of smoke abatement during 1957. We in this Department welcome this new legislation, and welcome especially the public interest that has been aroused in this important problem. It should be pointed out, however, that much of the smoke nuisance lies in ordinary domestic smoke, and the public themselves can do a great deal to prevent much of the dirt that exists in the air we breathe.

Two hundred and seven observations of smoke emission in respect of fifty-one chimneys were taken during the year. In only

four cases was the Byelaw limit of three minutes in half an hour exceeded.

Full details of the atmospheric pollution gauges are given in the Public Health Inspector's report.

Since 1952, we have had instruments sited in all parts of the Borough for the measurement of atmospheric pollution. These instruments are of the standard pattern of the Department of Scientific and Industrial Research, which gave us advice as to the siting of the instruments. The extent of pollution by deposited matter is determined by exposing deposit gauges for a period of one month and examining the contents. In this way the amount of both liquid and solid parts of the sample can be ascertained. It will be seen that there was an increase in the total solids deposited in tons per square mile in respect of all the gauges with the exception of the one at Clifton. This increase is largely due to an increase in the soluble solids which amounted to ninety-eight tons per square mile as compared with sixty-nine tons in the previous year. As I mentioned last year, the amount of soluble solids follows very closely the rainfall, and the rainfall for 1956 had a monthly average of 2.68" as compared with 1.64" for 1955. The insoluble solids showed only a slight fall from sixty-nine tons per square mile in 1955 to sixty-three tons per square mile in 1956.

We also measured the amount of atmospheric SO_3. This is given in milligrams of SO_3 per 100 sq. cms. per day, the method employed being to expose a small cylinder coated with lead peroxide in the air for one month. This is then analysed for sulphates. By repeating this process monthly we have a good idea of the state of atmospheric pollution in this Borough. The total daily average of SO_3 per 100 sq. cms. per day increased from 1.46 in 1955 to 1.60 in 1956. Comparable figures since 1952 are :—

1952	1.09	per 100 sq. cms. per day.
1953	1.32	,, ,, ,, ,, ,, ,,
1954	1.51	,, ,, ,, ,, ,, ,,
1955	1.46	,, ,, ,, ,, ,, ,,
1956	1.60	,, ,, ,, ,, ,, ,,

It will be seen that the trend has been towards an increase in the amount of Sulphur Dioxide in the atmosphere we breathe. Further study of the table given in the Public Health Inspector's report shows how much higher the amounts of Sulphur Dioxide are in the winter months, reaching a peak in January and decreasing to 0.57 mgms. per 100 sq. cms. per day in June.

Public Baths

I am obliged to Mr. W. Cockroft, the Baths Manager, for the following statement of the attendances of bathers during 1955 and 1956 :—

Mixed —	1955	1956
Mixed Bathing	24,930	22,032

Females —		
Ladies	932	809
Girls	4,731	3,739
Girls' Swimming Classes	5,317	12,092
Ladies' Club and Season Tickets	2,282	2,531
Ladies' Slipper Baths	1,022	1,091
Males —		
Men	2,404	2,092
Boys	3,449	3,483
Boys' Swimming Classes	15,292	15,364
Men's Club and Season Tickets	1,958	2,281
Men's Slipper Baths	8,195	7,755
	70,512	73,269

It will be seen that there was an increase in the number of swimmers, particularly in the girls' swimming classes. The number of slipper baths taken has shown a fall in recent years, due, no doubt, to the provision of more baths in the homes.

The swimming bath is well maintained.

Housing Programme

The Borough Engineer informs me that the following houses were completed in 1956 :—

Cain Lane Estate —	
Single persons flats	8
2-bedroom houses	10
3-bedroom houses	14
Field Lane Estate —	
Single persons flats	20
Old persons bungalows	8
2-bedroom houses	22
3-bedroom houses	18
Total	100

This compares with a total of 128 houses, a list of which was given in last year's Report, which it was hoped to complete in 1956.

The programme for 1957 is as follows :—

Field Lane Estate —	
Single persons flats	16
Old persons bungalows	12
2-bedroom houses	46
3-bedroom houses	10
Lillands Lane —	
Single persons flats	8
2-bedroom houses	2
3-bedroom houses	3

Deep Lane, Clifton —	
Old persons bungalows	6
3-bedroom houses	8
Clifton Hospital —	
1-bedroom flats	4
Total	115

Up to the end of 1956, 972 post-war houses and 375 pre-war houses had been built by this Corporation, so that we now have almost 1,350 Council houses in the Borough, and over one-ninth of the houses are owned by the Corporation.

In my last two annual reports, reference has been made to our slum clearance programme, which was formulated under the Housing Repairs and Rents Act, 1954. The work of inspection of the first three areas, which comprise 148 houses, in the Lillands Lane and Closes Road area, between Lillands Lane on the north, Longroyde Road on the south, and Thornhill Road on the east, was completed during 1956, and in July official representation of these areas was made to the Health Committee. The Council later made a clearance order, which included the three areas. The Order was submitted to the Ministry of Health for confirmation. Most people, and particularly the tenants, recognised that the houses had served their full period of useful life, and appeals were few in number. By the end of the year, the date of the public inquiry had not yet been fixed.

The building of new houses is universally recognised as one of the most important social services carried out by the Council, and we in this Department especially like to see the pleasant new estates, where the tenants enjoy a standard of living far better than that of their fathers. The Council are continuing their building programme to rehouse tenants displaced by slum clearance. The cost of building, necessarily, has been increased by higher interest charges, and one worrying feature has been the large differential that exists between existing older houses and new Council houses. Despite this large difference in rent, the difference in amenities provided, associated with a period of full employment, has meant that there has been no considerable falling off in demand for Council houses. Most of the worst cases of overcrowding have now been dealt with, and our problem now is to re-house tenants living in unsatisfactory houses. Despite inflation and high interest charges, I hope it will be possible for future housing programmes to continue at least at the present rate. Even if the present rate of inflation does not continue, past history would seem to indicate that houses built today will tend to appreciate in value during the years that lie ahead, and although the present cost of Council houses is particularly frightening to those of us who lived in days when the purchasing power of the pound was considerably more, it may be that our successors will regard the cost of building in 1957 as comparatively low. I feel sure that in providing houses for the people, the Council are not only doing

the right thing, but are following the only proper course, and one which their successors will appreciate.

Three houses were represented to the Council under Section 11 of the Housing Act, 1936, and one under Section 12 of the Housing Act, 1936. In addition, five informal undertakings not to re-let were accepted.

In March, the Housing Committee agreed that back-to-back houses of Types II and III, where there are separate windowed sculleries, should be considered for improvement grants. I welcomed this decision, as it was obviously impossible for all back-to-back houses to be included in the slum clearance programme, simply because they were back-to-back, and many of the Type II and Type III back-to-back houses, with modern methods to improve ventilation, will serve as satisfactory buildings for some years to come.

Twenty-three new cases of overcrowding under the Housing Act of 1936 came to our notice during the year, and eleven cases of overcrowding, involving fifty-two persons, were relieved in this period.

During the year, forty-two houses were inspected for improvement grants, which were made in thirty-eight cases. Further details are given later in the Chief Public Health Inspector's report.

It was decided at the Council meeting in December that improvement grants should be temporarily suspended. This is unfortunate, as there are still many old houses which could be improved. Unfortunately, improvement grants were generally applied for by owner-occupiers, and landlords usually did not avail themselves of this opportunity of improvement for themselves and their tenants. I hope it will be possible for the Council again to allow improvement grants, and owners of tenanted property will improve their property and make their tenants more comfortable.

INSPECTION AND SUPERVISION OF FOOD

Premises for the Manufacture, Preparation and Sale of Food

All premises connected with food have been visited regularly, 1,072 visits having been made to the various types of food premises.

This compares with 700 visits made during 1955. The Food Hygiene Regulations came into force during the year, and your Public Health Inspectors utilized their routine visits to explain the new legislation to individual occupiers of food premises. They helped them to establish codes of practice and prepare notices with regard to hand-washing and smoking. Gradually, over the years, a great deal has been done in the modernising of food premises, and consequently the implementation of the Food Hygiene Regulations did not present as great a problem as it might have done, but they still threw additional work on the Department, work which was welcomed. On most of the visits, discussions were made which were informal in character, as, generally speaking, the occupiers of food premises showed a spirit of co-operation and enlightenment and did not require written or verbal notification of offences against the Regulations. The goodwill which has been established between the average food trader and the Public Health Inspectors is most valuable.

No regulations can ensure clean food. Satisfactory premises are important, and codes of practice are still more so, but in the end, it is the individual food handler who counts. Altogether this year there were thirteen cases of Food Poisoning, and these are discussed further in the section on notifiable diseases. There were no major outbreaks of Food Poisoning attributed to food prepared in this district, but a small outbreak in a neighbouring district may have been caused by food prepared here. The premises in which this food was prepared are well run and comply with the Food Hygiene Regulations. From the work done on this matter, it would appear that the organism responsible for the outbreak gained access to the meat before entering this district.

Milk Supply

Although we are not responsible for the production side of milk supply, regular samples are taken from the distributors and all unsatisfactory samples are reported to the Ministry of Agriculture and Fisheries. Sixty-five distributors were registered.

Sixty-four formal samples taken for chemical analysis on behalf of the West Riding County Council were satisfactory, all of which were classified as genuine. In addition, 165 samples were taken for the methylene blue test, and of these, twenty-one were found to be unsatisfactory and required following up.

None of the seven samples of sterilised milk taken for the turbidity test showed inefficient sterilisation, and all the fifty-nine

samples submitted for the phosphatase test showed satisfactory pasteurisation.

Twenty samples were taken for the biological test for Tuberculosis. None of these samples were found to be infected with the tubercle bacillus. These samples of milk included samples submitted from dairies which had supplied families in which there were cases of Non-Respiratory Tuberculosis.

Ice Cream

Two premises were registered for the manufacture of ice cream, and regular routine inspections of the premises were made. The premises are satisfactory. There are now sixty-three premises registered for the sale of ice cream.

A total of forty-two samples of ice cream were taken for examination by the methylene blue test and, of these, thirty-six were found to be in Grade I, three in Grade II, and three in Grade IV. One of the samples of ice cream placed in Grade II was produced outside the Borough. Full details of these samples are contained in the Public Health Inspector's report.

No coliform organisms were found in the eleven samples of " iced lollies " submitted for examination. None of the " iced lollies " were submitted for chemical examination.

Synthetic Cream

Sampling of goods containing synthetic cream was undertaken during the year, and sixty-eight samples were submitted. In three cases, Staphylococcus Aureus was isolated.

Meat and Other Foods

A detailed statement regarding the action taken with regard to meat and other food is given in the Health Inspector's Report. Condemned meat is sent for processing. Other waste foods, along with kitchen waste, is dealt with in the plant of a neighbouring County Borough.

Adulteration, etc.

The administration of the Food and Drugs Act is carried out by the West Riding County Council, samples being taken by our Health Inspector.

Chemical and Bacteriological Examination of Food

Samples of food stuffs for chemical and bacteriological examination are taken by the County Council.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES

General

The infectious disease most prevalent during 1956 was Sonne Dysentery. Altogether 196 cases were notified.

Diphtheria Immunisation

There has been no case of Diphtheria notified in Brighouse since 1950. I consider that it is fair to assume that the fall in the incidence of this disease, which is general throughout the country, is partly due to Diphtheria immunisation.

The prophylactics used were two doses (0.5 and 0.5 c.c.) of P.T.A.P. for children under five years. For children over five years, T.A.F. was used in three doses of 1 c.c. each. Previously immunised children were given a reinforcing dose of 1 c.c. on reaching the age of four and a half to five years, and again at ten years of age.

Three hundred and twenty-nine children completed a full course of primary immunisation during the year. Two hundred and two were given a re-inforcing dose.

The number of children who had completed a full course of immunisation at any time up to the 31st December, 1956, is as follows :—

	(Age at 31st December, 1956)						
Under 1	1 yr.	2 yrs.	3 yrs.	4 yrs.	5–9 yrs.	10–14 yrs.	Total
50	259	281	298	284	2005	1654	4831

The age in this table is at the 31st December, 1956, and it will be appreciated that many of the children immunised early in 1956 but born in 1955 were actually under one at the time of immunisation. The usual age for immunisation against Diphtheria has been eight months, and the immunisation takes a month to complete, so that it is only possible for the children born in the first three months of the year to be immunised during the year of birth.

As with last year, I give the figures of children immunised in two groups, the first group being children who have received either an initial or a booster dose in the last five years, and the second group those who were immunised at a date preceding this.

Number of children at 31st December, 1956, who had completed a course of immunisation at any time before that date (i.e. at any time since 1st January, 1942)

Age at 31.12.56 i.e. Born in Year	Under 1 1956	1–4 1955–52	5–9 1951–47	10–14 1946–42	Under 15 Total
A. 1952–1956	50	1122	1334	386	2892
B. 1951–1942	——	——	671	1268	1939

Whooping Cough Immunisation

Three hundred and sixty-nine children were immunised against Whooping Cough during the year, and of these 265 were under one year of age.

In many respects Whooping Cough is now one of the more serious of the infectious diseases. It causes a prolonged illness and is particularly wearing to a very young child. An attack of Whooping Cough during the winter months can be very disabling indeed. For this reason we welcome the response made to Whooping Cough immunisation. Although protection does not appear to be as complete as in the case of Diphtheria, I consider that Whooping Cough immunisation, particularly at a young age, might well mean the saving of lives.

Vaccination for Smallpox

One hundred and fifty-four vaccinations and thirty-six re-vaccinations were carried out during the year. This compares with last year's figures of 167 primary and fifty re-vaccinations.

It is regrettable that these figures are not higher. Smallpox has not appeared in this district since 1931, but in these days of air travel when there is a possibility of the arrival into this country of patients incubating the disease unknown to themselves, vaccination becomes a duty.

B.C.G. Vaccination

Ninety thirteen-year-old children received B.C.G. vaccination.

NOTIFIABLE DISEASES

Diphtheria

No case of Diphtheria was notified in the Borough.

Smallpox

No case of Smallpox occurred during 1956.

Ophthalmia Neonatorum

One case of Ophthalmia Neonatorum was notified during 1956.

Puerperal Pyrexia

One case of Puerperal Pyrexia occurred during 1956.

Cerebro Spinal Fever

No case of Cerebro Spinal Fever was notified during 1956.

Pneumonia

Thirty-seven cases of Pneumonia were reported, compared with thirty-six in 1955. There were fifteen deaths.

Sonne Dysentery

There were 196 cases of Dysentery notified during the year, the greatest number of notifications in respect of any infectious disease. All but eight of these cases occurred in the first quarter of the year, 137 cases being notified in January, forty-four in February and seven in March. In 1955 we had fifteen cases, eight of which were notified in the first quarter and seven in the last quarter of the year.

At the end of October, 1955, two cases were notified. These occurred in a family living in the Rastrick area. A further case from Rastrick and two others from the centre of the town were notified in November, and at the end of December a case was notified from the new Field Lane Estate at Rastrick. Meanwhile, several children attending the Day Nursery had a mild diarrhoea and Sonne Dysentery was suspected. Although this disease in this Borough has generally been mild in character, it can always be dangerous, especially to young children, and, year by year, in the Rastrick area, we have had a high incidence during the winter months. At the beginning of January, 1956, the Doctors of the town were informed that an outbreak of Sonne Dysentery seemed likely. Meanwhile, specimens were taken from all the children in the Day Nursery, and the organism was isolated from thirty children out of a total of 41. It was also found in five members of the staff out of a total of eleven. Of the members of the staff, only one had any symptoms of illness.

The Rastrick schools were investigated and it was apparent that at Longroyde Infants' School there was a very large number of absentees. All the absentees from schools were followed up, and those where there was any history of diarrhoea as the cause were

thoroughly investigated. At Longroyde School, a rectal swab was taken of every child remaining in the School. Of these children, all of whom appeared perfectly well, four were found to have the organisms of Sonne Dysentery. It is interesting to report that these four children later developed symptoms of the disease, so that bacteriological evidence of the infection apparently preceded the illness. Altogether, in Longroyde Infants' School, there were forty-two cases and two teachers affected, and in the Junior School, seven cases, and one teacher and his wife.

All positive cases were followed up and an endeavour was made to obtain specimens not only from the children but from their parents and contacts. This work was undertaken by the Health Visitors, who, generally speaking, knew the families and were able to persuade them. Altogether, 1,300 specimens were taken, and we had a total of 196 individual persons with positive results. Where positive results were obtained from members of the family who were not originally notified, notifications were only submitted in respect of those who had symptoms, but it is interesting to record that when the history was carefully gone into, only nineteen of the whole total could be designated as being absolutely symptomless. Many of them had only a very slight attack of diarrhoea, amounting only to looseness of the motions with no inconvenience, or practically none. In addition to notifications from positive cases with clinical symptoms, two cases with Clinical Dysentery which were notified never had positive stools.

In Bailiffe Bridge School, fourteen cases occurred. None of the other schools were affected to any marked degree, and the disease was very largely confined to Rastrick and the town areas. Less than twenty families outside these two areas were affected. All the schoolchildren affected had symptoms.

In the course of our investigations we found eight food handlers, two of whom were school meals assistants, the remaining six working for commercial firms. In every case the person involved was taken off food handling and the co-operation of the firm freely given.

Scarlet Fever

During 1956 there were twenty-three cases of Scarlet Fever, compared with thirty-eight in 1955. There were few complications. Five cases were admitted to hospital where isolation could not be carried out safely at home.

Chicken Pox

This disease is notifiable in this area, and ninety-six cases were notified, compared with 134 in 1955.

Measles

Four cases of Measles were notified during the year, compared with 695 cases last year. There were no deaths from the disease.

Whooping Cough

There were eighty-four cases of Whooping Cough notified in 1956, compared with seventy-one in 1955.

Acute Anterior Poliomyelitis

There were four cases of Acute Anterior Poliomyelitis during the year, three of which were paralytic.

The first case occurred in the Rastrick area in a boy, aged six. He had a sore throat and was absent from school from the 29th June to the 2nd July. He returned to school on the 3rd July, and attended again on the 4th and 5th, despite having complained of headache and pain in his limbs. When he returned home in the afternoon, a diagnosis of Paralytic Poliomyelitis was made. He had been in contact with a woman who lived outside the town, but who had had an illness which may have been Non-Paralytic Poliomyelitis. In view of his attendance at school during the period of illness, a careful watch was made on all the other children who had been in contact with him. Rather more children than usual appeared to have colds but none of them developed Poliomyelitis.

Another child, in the Bailiffe Bridge area, commenced his illness on the 3rd July, with headache and dizziness. He also had a history of contacts outside the Borough. This boy was admitted to hospital on the second day of the illness, and had no school contacts.

The third case is the sister of a boy who attended the same school as the first case and was in the Rastrick area. Her brother had vomited on the 8th July, and was absent from school on the 9th July. This vomiting was thought to be due to travel sickness, from which he had previously suffered, and he had no other signs. His sister, who was only a year old, was fretful on the 22nd July, and quite well on the 23rd and 24th July, but on the 25th, again fretful, with an obvious weakness of her lower limbs. This case was a severe case of Paralytic Poliomyelitis. It seemed possible that her brother may have been an abortive case of Poliomyelitis.

The fourth case commenced on the 1st August. This case was also in the Rastrick area. The patient was affected on the left side of the face and was considered to be a case of Polio-Encephalitis, and a connection was established with the third case.

It will be seen that three of the cases appeared to have possible connections, and that all the cases occurred between the 28th June and the 1st August, a period of just over one month.

All these cases have done reasonably well, and three out of the four cases have no residual paralysis.

Food Poisoning

This year I have to report that thirteen cases of Food Poisoning occurred in the Borough, eight of these being in the third quarter of the year, four in the fourth quarter, and the remaining one in the

second quarter. From this case, a child of two, Salmonella Typhimurium was isolated but was not found in the family contacts, who had eaten the same food. We were unable to find the source of infection.

In the third quarter, a case of Food Poisoning was notified in a child, aged three, on the 8th August. Salmonella Typhimurium was again isolated. This child had eaten no suspicious food, but specimens of her mother's stools showed the same organism. It seemed possible that the mother, who had eaten sausage and meat pie, had infected the daughter, and on questioning, she also gave a history of diarrhoea. Interestingly, from another child of this woman, aged two, Salmonella Bredeney was isolated. This child had also eaten meat products. On questioning, he had had a similar illness in the middle of July.

In the course of our investigations, another case was found, which occurred on the 19th July, in a man who had eaten fried sausage and had had symptoms of Food Poisoning within seven hours. The organism was again Salmonella Typhimurium.

The premises where the food had been obtained were inspected, and investigation of all the workpeople and all the possible vehicles of infection failed to reveal any pathogenic organism, but Salmonella Typhimurium was isolated from a freshly delivered carcase, which had been slaughtered outside the Borough. This was found by swabbing the raw meat immediately on arrival at the factory. In view of this, the General Medical Practitioners were circulated, and four other cases of possible Food Poisoning were investigated. Two of these cases were not considered to be Food Poisoning, but in the other two cases Salmonella Bredeney was again isolated and in one of these cases sausage was probably the vehicle of infection. No source was found for the other case.

Of the four cases in the fourth quarter, only two were considered to be cases of Food Poisoning, one of which originated outside the area, while on holiday. Salmonella Typhimurium was isolated in this case. In the other case, pork sausage had been eaten, and Salmonella Typhimurium was isolated. This was in a child of two but none of the other members of the family, who had also eaten sausage, were affected, nor was the organism isolated from their stools.

Tuberculosis

The statistics relating to Tuberculosis are presented in tabular form in Table 14.

No action has been found necessary under the Public Health (Prevention of Tuberculosis) Regulations, 1925, nor under the Public Health Act, 1936, Section 172.

There were twenty-six new cases of Respiratory Tuberculosis during 1956, as compared with twenty-one in 1955 ; and three cases of Non-Respiratory Tuberculosis, as compared with two in 1955.

In addition, two patients suffering from Tuberculosis, one Pulmonary and one Non-Pulmonary, were transferred into the district.

The trend of notification of Respiratory Tuberculosis since 1937, when the Borough attained its present boundaries, continued generally downward until 1948. Since that time, more effort has been made to trace contacts and to have regular mass radiography surveys, and the notification rate crept up until 1953, when the high number of fifty-seven new cases of Respiratory Tuberculosis were notified. Since this the disease has shown a reduction, in 1954 to twenty-four and in 1955 to twenty-one, but this year it has risen to twenty-six. It should be remembered, however, that this year a mass radiography survey was carried out in the Borough, and eleven cases of active Tuberculosis and eleven cases of inactive disease were found at this survey, so that apart from this survey the trend towards a reduction in the number of cases was continued. Full particulars of this survey are given below.

There is no doubt, however, that we are now getting to know of cases very much earlier, and all contacts are kept under observation. At the 31st December, 1956, we had 375 known contacts of the disease. Of these, forty-six were contacts of cases notified during 1956. Twenty of our contacts were X-rayed during the year at the Royal Halifax Infirmary. Four children under sixteen years of age were notified during the year. One child contact was found to have the disease.

There were twenty-one adult cases occurring in persons over twenty-one years of age, fifteen males and six females. Three-quarters of the adult cases occurred in males, and nine of these were at the ages of forty-five upwards.

There were three cases of Non-Pulmonary Tuberculosis notified during the year, one case being a female child suffering from Tuberculosis of the neck glands, and the other two cases being a female suffering from Tabes Mesenterica and a male adult with Tuberculosis of the spine.

There were five deaths from Pulmonary Tuberculosis during the year.

On the whole, the prospects for patients suffering from Tuberculosis are very much better than they were. A sufficiency of sanatorium beds has prevented the long waits for admission previously experienced and new drugs have resulted in a reduction in the length of treatment. Early cases of Tuberculosis can usually be treated adequately and satisfactorily and it must be our object to discover them.

Tuberculin testing and B.C.G. vaccination have been undertaken in respect of the thirteen-year-old children in the schools in the district. This treatment was offered to 305 children, and the parents of 134 availed themselves of it, so that just under fifty per cent. of the parents consented to this very desirable measure. This is

a poor percentage as compared with the County average for 1955 of seventy-two per cent., and it is hoped that the advantages will be apparent of protecting a child who is shortly to leave the environment of school and home and to mix with the adult population at large and thus be exposed to greater risk. Of the 134 children tested, forty-eight were found to be positive and presumably had been exposed to the disease at some time. This compares with the percentage positive of 32.2 in the County as a whole in 1955. As the figures are small ones, too much significance should not be attached to them, but it would appear that the risk of contracting Tuberculosis may be slightly higher than that for the County as a whole. All the children who had a negative Mantoux test later received B.C.G. vaccination. This vaccination against Tuberculosis, usuing the attenuated strain of the Tubercle Bacillus, is by now well established, and it is hoped that more parents will take advantage of it. Arrangements have been made for all the children vaccinated to be tested again next year.

The Care Committee, formed at the end of 1953, continues to do good work. This Committee covers the whole of the Division and has received remarkable support including help from the County Council and the Councils of Brighouse Borough and Elland and Queensbury and Shelf Urban Districts. In view of the reduction in incidence in this Division, it was found possible to help patients suffering from other serious disabling illnesses, such as Cancer of the lung, Chronic Bronchitis and heart diseases. The disablement from these diseases and the period of chronic invalidism is comparable, and, indeed, often exceeds that of Tuberculosis. The Committee's work, however, must be primarily confined to Tuberculosis, and while embarking on this wider field, it was appreciated that the excellent work that had been done in respect of Tuberculosis should not be curtailed. Many private individuals and firms have given generously to make it possible for this help to be given.

Previously, details of the help given by the Care Committee have included information for the whole Division, for this Committee is a Divisional committee and help is given where the need is greatest and is not allocated according to the funds received from the area of each particular County District. This year, however, by the kindness of the Secretary, Mr. J. R. C. Wells, I am able to give particulars of help actually received by Brighouse families.

Thirty-two patients received practical help. Six of these were in receipt of monthly food parcels, and the total number of food parcels issued was twenty-nine. In addition, twenty-two Christmas food parcels were distributed. An annual outing to Blackpool was arranged, and thirty-eight adults and eighteen children from the Brighouse area had a day at the seaside. This gave families who would not otherwise have been able to have a holiday a day at the seaside – a day free from anxiety.

In addition to the direct help given by this Committee, which is a charge on the Committee's funds, very much more work is undertaken in helping patients and their families to solve their own problems. They are helped and advised on their approach to the National Assistance Board and grants for travelling expenses to enable family relatives to visit the patient while in hospital have been obtained from the West Riding Distress Fund. The Brighouse Library Committee and others have furnished us with books which have helped to pass away the long period of inaction that the disease entails, and altogether the record of this Committee is one of willing service gladly given and highly appreciated.

Certain patients suffering from active Tuberculosis received milk free daily under the Extra Nourishment Scheme of the County Council. At the beginning of the year, thirty-nine patients were receiving this extra nourishment. Fifteen new grants were made, and at the end of the year, thirty-six patients were receiving extra nourishment, twenty-two having one pint daily and fourteen two pints daily.

Help was received from the County Welfare Officer in running a diversional therapy service, and the services of a trained lady was made available to patients who would benefit by this.

MASS RADIOGRAPHY SURVEY

The Mass Radiography Unit of the Leeds Regional Hospital Board visited the district in June, and sessions were held at the St. John Ambulance Hall, Brighouse, and at Messrs. Blakeborough and Firth's. I give below the results supplied to me by the Unit. It is not possible, however, to draw any conclusions at all from such evidence since the persons examined constitute only a small proportion of the population and are not necessarily representative of the population taken as a whole. The information given is in respect of people actually examined during the survey and may, therefore include persons normally resident in other areas.

	Male	Female	Total
1. Examinations carried out			
(a) Miniature X-rays taken	1,547	895	2,442
(b) Large X-rays taken	49	18	67
2. Analysis of Provisional Findings			
(a) Cases of active Tuberculosis	9	2	11
(b) Cases of inactive Tuberculosis	4	7	11
(c) Other abnormalities (see below)	22	4	26
(d) Failed to re-attend for large film	3	0	3

3. Analysis of abnormalities other than Tuberculosis (see 2(c) above)

1. Anatomical abnormalities	3	0	3
2. Bacterial or Virus Pulmonary Infections	2	1	3
3. Honeycomb Lung	1	0	1
4. Bronchiectasis	4	1	5
5. Pulmonary Fibrosis – non tuberculous	2	0	2
6. Pneumoconiosis – non tuberculous	1	0	1
7. Benign Neoplasms of Lungs and Mediastinum	1	0	1
8. Primary Malignant Neoplasms	1	0	1
9. Pleural Thickening	2	1	3
10. Cardio vascular lesions – congenital	1	0	1
11. Cardio vascular lesions – acquired	4	1	5

MALIGNANT DISEASE

Forty-seven deaths (19 males and 28 females) were registered as being caused by some form of malignant disease.

Three of the male deaths and one of the female deaths were caused by malignant disease of the lung. These statistics among a small population are not significant but merely show that about 1 in 70 of all male deaths were attributed to Cancer of the Lung, and 1 in 100, of all female deaths. This compares with a national average of 1 in 18 of all male deaths and 1 in 100 of all female deaths.

Lung Cancer statistics have been causing some concern to everyone who is interested in preventive medicine and, statistically, smokers have a higher mortality from this disease. This mortality is higher in heavy smokers than in light smokers, and in cigarette smokers than in pipe smokers. The deaths occur in the older age groups and smoking is begun in the younger age groups. It would appear that any propaganda to reduce smoking should be directed towards children in their later years at school, for despite the fear of Cancer, the habit, once established, is usually persisted in by adults. It should be remembered that children do not smoke actually while in the classroom, and in any case school activities form a very small, if very significant, part of the children's day, and the co-operation of parents is essential if we are to discourage children from smoking.

Smoking has an adult association, which is considered desirable during the last years of school, when the adolescent is anxious to throw off childish ways. There is no doubt that the pocket money children receive is higher proportionately than they have received previously. If this pocket money is to be spent on cigarettes, the

parents may be doing their children a great disservice. I know of some cases where an interest in sport has discouraged boys from smoking, and it appears to me that the association of smoking with shortness of "wind" might be a useful form of approach, but unfortunately many of the boys who smoke regularly are not active participators in any sports. I am informed that some 15-year-old children have a regular allowance of cigarette money. If parents allow and encourage their children to smoke, the teachers and the public health workers can do little.

Other factors are concerned in the causing of Cancer of the lung, but on present evidence it should be the duty of every parent, schoolmaster and older workman to discourage and deter young people from this habit.

TABLE 12

MONTHLY NOTIFICATIONS OF INFECTIOUS DISEASES DURING 1956

Month	Scarlet Fever	Tuberculosis		Pneumonia	Meningococcal Infection	Erysipelas	Diphtheria	Ophthalmia Neonatorum	Paratyphoid Fever	Chicken Pox	Measles	Whooping Cough	Anterior Poliomyelitis	Dysentery	Food Poisoning	Puerperal Pyrexia	Totals
		Lungs	Other														
January	8	2	—	8	—	1	—	—	—	4	1	27	—	137	—	—	188
February	4	—	—	16	—	1	—	—	—	14	—	10	—	44	—	—	89
March	1	3	—	6	—	1	—	—	—	15	1	4	—	7	—	—	38
April	4	—	—	—	—	—	—	—	—	3	—	9	—	—	—	—	16
May	—	1	—	1	—	—	—	—	—	—	—	3	—	1	1	1	8
June	—	2	—	1	—	—	—	—	—	—	—	4	—	—	—	—	7
July	—	10	1	2	—	—	—	—	—	33	—	10	3	—	—	—	59
August	—	1	—	1	—	1	—	1	—	22	—	4	1	1	8	—	40
September	—	4	—	1	—	—	—	—	—	3	—	5	—	—	—	—	13
October	2	1	1	—	—	—	—	—	—	2	—	6	—	6	2	—	20
November	1	1	—	1	—	1	—	—	—	—	—	2	—	—	1	—	7
December	3	1	1	—	—	—	—	—	—	—	2	—	—	—	1	—	8
Totals ...	23	26	3	37	—	5	—	1	—	96	4	84	4	196	13	1	493

TABLE 13

NOTIFIABLE DISEASES (OTHER THAN TUBERCULOSIS) AND HOSPITAL ADMISSION DURING THE YEAR 1956

Disease	Cases Notified	Admitted to Hospital	Total Deaths
Measles	4	—	—
Smallpox	—	—	—
Scarlet Fever	23	5	—
Diphtheria	—	—	—
Pneumonia	37	3	15
Chickenpox	96	—	—
Acute Poliomyelitis	4	3	—
Dysentery	196	—	—
Whooping Cough	84	—	—
Food Poisoning	13	—	—
Puerperal Pyrexia	1	—	—
Paratyphoid Fever	—	—	—
Ophthalmia Neonatorum	1	—	—
Erysipelas	5	—	—
Totals ...	464	11	15

TABLE 14

TUBERCULOSIS – New Cases and Mortality during 1956

Age Periods	New Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
0	—	—	—	—	—	—	—	—
1	1	—	—	—	—	—	—	—
5	—	1	—	1	—	—	—	—
10	—	1	—	—	—	—	—	—
15	1	3	—	—	—	—	—	—
20	1	1	—	—	—	—	—	—
25	3	3	—	1	—	1	—	—
35	2	—	—	—	—	1	—	—
45	3	1	—	—	—	1	—	—
55	4	—	1	—	1	—	—	—
65 and upwards	1	—	—	—	1	—	—	—
Totals ...	16	10	1	2	2	3	—	—

TABLE 15

ANNUAL INCIDENCE OF VARIOUS INFECTIOUS DISEASES IN BRIGHOUSE SINCE 1893.

Year	Small-Pox	Scarlet Fever	Diph-theria	Ent'c Fever	Erysi-pelas	Tuberculosis			Pneu-monia
						Lungs	Other	Total	
1893	19	152	3	9	21				
1894	—	31	8	31	10				
1895	—	40	7	25	16				
1896	—	46	5	30	24				
1897	—	66	6	21	36				
1898	—	86	5	22	33				
1899	—	195	11	17	20				
1900	—	95	17	16	16				
1901	—	34	44	6	14				
1902	12	51	20	8	12				
1903	13	48	3	3	3				
1904	69	39	6	4	5				
1905	—	57	10	16	13				
1906	—	68	12	9	15				
1907	—	23	37	8	7				
1908	—	25	24	6	8				
1909	—	124	19	7	7				
1910	—	45	12	3	6				
1911	—	22	9	5	7				
1912	—	56	6	1	7				
1913	—	122	6	1	7	62	11	73	
1914	—	203	24	3	14	42	12	54	
1915	—	60	99	2	16	35	17	52	
1916	—	20	36	3	5	24	8	32	
1917	—	13	15	1	3	57	16	73	
1918	—	22	14	—	4	71	8	79	
1919	—	39	11	3	7	40	11	51	
1920	—	27	13	—	13	27	8	35	14
1921	—	151	13	—	3	21	6	27	7
1922	—	72	8	1	18	17	8	25	14
1923	—	71	6	1	5	15	9	24	9
1924	—	65	6	3	3	26	11	37	20
1925	2	62	2	1	11	22	17	39	13
1926	—	18	4	1	7	30	14	44	11
1927	30	15	3	2	2	24	8	32	22
1928	5	37	3	1	6	22	8	30	8
1929	—	207	7	6	3	16	9	25	17
1930	5	179	24	1	4	18	15	33	10
1931	9	40	19	1	6	21	12	33	14
1932	—	41	18	3	9	24	7	31	16
1933	—	38	11	2	11	27	16	43	16
1934	—	27	15	1	8	5	4	9	5
1935	—	86	13	—	11	13	5	18	12
1936	—	80	11	—	4	15	7	22	7
1937	—	91	26	1	11	20	8	28	30
1938	—	70	32	—	19	22	11	33	31
1939	—	36	22	—	19	18	6	24	32
1940	—	28	11	3	17	19	7	26	36
1941	—	49	27	1	8	18	5	23	23
1942	—	102	12	—	5	14	4	18	18
1943	—	80	16	—	8	22	5	27	25
1944	—	94	18	—	5	12	10	22	19
1945	—	47	7	—	4	17	9	26	9
1946	—	30	4	2	6	11	2	13	16
1947	—	51	6	—	6	23	4	27	7
1948	—	42	2	—	6	25	8	35	16
1949	—	37	1	—	4	33	2	33	41
1950	—	46	1	—	2	17	6	23	10
1951	—	68	—	—	5	26	4	30	31
1952	—	40	—	—	1	44	6	50	30
1953	—	117	—	—	4	57	3	60	16
1954	—	26	—	—	6	24	3	29	18
1955	—	38	—	—	—	21	2	23	36
1956	—	23	—	—	5	26	3	29	37
Totals	164	413	830	291	601	1145	355	1500	696
Av'rg's	2.6	64.3	13.0	4.5	9.4	26.0	8.1	34.1	18.8

TABLE 16

BIRTH RATE, STILL BIRTH RATE AND INFANTILE MORTALITY RATE FOR 10 YEAR PERIODS FROM 1896

Decade	Live Births Rate per 1,000 of the Population		Still Births Rate per 1,000 Total Births	Infantile Mortality Rate		Total Deaths of Infants from Still Birth and Failure to survive 1st year of life. Rate per 1,000 total births
	Brighouse	England & Wales		Brighouse	England & Wales	
1896-1905	23.70	28.8	not known	139	147	not known
1906-1915	18.44	24.8	49.6	94	123	133.8
1916-1925	15.6	20.1	47.77	81	83	117.9
1926-1935	12.3	15.8	54.7	63	65	114
1936-1945	14.35	15.4	30.48	53.97	53	82.68
1946-1955	15.12	16.6	21.88	28.10	31	49.31
1956	14.4	15.7	15·7	32.0	23.8	47.19

TABLE 17

DEATHS FROM SPECIFIED CAUSES SINCE 1896

BOROUGH OF BRIGHOUSE

Decade	Maternal Mortality	Deaths from Various Causes—Rates per 1,000 Population												
	Death Rate per 1,000 Total Births	Typhoid and Para typhoid Fever	Small-Pox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Cancer	Tuberculosis			All Causes	
										Lungs	Other	Total	B'house	Engl'd & Wales
1896-1905	4.06	0.08	0.02	0.32	0.17	0.23	0.16	0.15	0.66	1.58	0.39	1.97	15.25	16.8
1906-1915	6.38	0.05	0.00	0.30	0.06	0.17	0.25	0.12	0.93	1.29	0.41	1.70	13.68	14.3
1916-1925	5.60	0.02	0.00	0.11	0.05	0.14	0.09	0.85	1.23	1.12	0.36	1.48	14.71	13.3
1926-1935	5.25	0.02	0.00	0.01	0.02	0.03	0.06	0.53	1.75	0.76	0.18	0.94	13.84	12.05
1936-1945	4.16	0.01	0.00	0.01	0.01	0.04	0.04	0.24	1.95	0.43	0.11	0.54	14.95	12.04
1946-1955	0.39	0.00	0.00	0.00	0.00	0.01	0.00	0.12	2.07	0.25	0.03	0.28	13.64	11.58
1956	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.07	1.54	0.16	0.00	0.16	13.00	11.70

TABLE 18

BOROUGH OF BRIGHOUSE.

TOTAL DEATHS FROM CERTAIN SPECIFIED CAUSES, AVERAGE DEATHS PER ANNUM, AND NOTIFICATIONS AND CASE MORTALITY OF CERTAIN INFECTIOUS DISEASES SINCE 1894.

	Maternal Mortality			Typhoid and Para typhoid Fever	Small-pox	Meas-les	Scar-let Fever	Whoo-ping Cough	Diph-theria	Influ-enza	Can-cer	Tuberculosis		
	Puer-peral Sepsis	Other Puer-peral Causes	Total									Lungs	Other	Total
Total Deaths since Incorporation of Borough, 1894	20	66	86	45	4	180	68	152	135	450	2196	1292	309	1601
Average Deaths Per Annum ..	0.32	1.05	1.37	0.71	0.06	2	1.1	2.41	2.14	7.14	34.86	20.51	4.90	25.41
Total Infectious Diseases Notified ...	—	—	—	302	164	Notifiable only since 1939 4966	1113	Notifiable only since 1939 1082	830	Not Notifiable	Not an Infectious Disease	1144 Notifiable only	354 Notifiable since	1498 1913
Case Mortality Rate per 100 Cases ...	—	—	—	14.90	2.44	3 d'ths since 1939 0.06	1.65	10 d'ths since 1939 0.92	16.19	—	—	659 d'ths since 1913 57.61	173 d'ths since 1913 48.87	832 d'ths since 1913 55.54

TABLE 19

ANNUAL BIRTHS, STILL BIRTHS AND INFANTILE MORTALITY IN BRIGHOUSE SINCE THE INCORPORATION OF THE BOROUGH, 1894

Year	Population	Total Births	Stillbirths		Live Births		Birth Rate for England and Wales	Deaths of Infants under 1 year	Infantile Mortality Rate per 1,000 live births		Total Deaths of Infants from Stillbirth or failure to survive 1st year of life	
			No.	Rate per 1000 total Births	No.	Rate per 1000 of population			Brighouse	England and Wales	Stillbirths and Deaths under 1 year of age	Rate per 1000 total births
1894	21,043				571	27.13	29.6	65	113.83	137		
1895	21,153				573	27.08	30.3	76	132	161		
1896	21,238				547	26.83	29.7	77	141	148		
1897	21,347				573	26.84	29.7	74	129	156		
1898	21,466				549	25.37	29.4	108	198	160		
1899	21,570				503	23.31	29.3	61	128	163		
1900	21,690				513	23.63	28.9	75	151	154		
1901	21,780				516	23.69	28.5	91	176	151		
1902	21,960				492	22.40	28.6	63	125	133		
1903	21,983				501	22.78	28.4	60	120	132		
1904	22,076				477	21.67	27.9	53	106	145		
1905	22,177				454	20.54	27.2	54	111	128		
1906	22,196				460	20.72	27.0	65	141	132		
1907	22,280	442	20	45.25	422	18.94	26.3	42	99	116	62	140.3
1908	22,365	475	23	48.32	452	20.21	26.5	47	104	120	70	147.6
1909	22,455	428	17	39.72	411	18.30	25.6	40	97	109	57	133.2
1910	22,520	427	24	56.26	403	17.89	24.8	36	89	105	60	140.5
1911	20,843	391	24	61.64	367	17.57	24.4	29	79	130	53	135.5
1912	20,900	377	18	47.74	359	17.77	23.8	29	81	195	47	124.4
1913	20,960	397	24	60.41	373	17.79	23.9	25	67	108	49	123.4
1914	21,020	398	17	42.71	381	18.12	23.8	29	76	105	46	115.1
1915	21,100	361	16	44.32	345	17.10	21.8	36	104	110	52	144.0
1916	19,748	366	21	57.38	345	16.06	21.6	21	61	91	42	114.8
1917	19,332	310	15	48.40	295	13.68	17.8	26	88.4	96	41	132.3
1918	19,364				304	14.01	17.7	36	118	97		
1919	21,000	304	11	36.18	293	14.01	18.5	26	88.6	89	37	121.3
1920	20,871	445	22	49.44	423	20.27	25.4	31	73.16	80	53	119.1
1921	20,610	416	22	52.90	394	19.12	22.4	38	111.0	83	60	144.2
1922	20,670				331	16.01	20.6	31	96.6	77		
1923	20,390	299	14	46.82	285	13.48	19.7	16	56.14	69	30	100.4
1924	20,100	314	19	60.51	295	14.66	18.8	13	44	75	32	101.9
1925	19,920	303	9	29.70	294	14.70	18.3	24	81.6	75	33	108.9
1926	19,440	311	17	54.66	294	15.1	17.8	14	47	70	31	99.7
1927	19,380	267	11	41.20	256	13.2	16.7	23	90	69	34	127.3
1928	19,460	264	12	45.45	252	12.9	16.7	11	44	65	23	87.1
1929	19,640	267	18	67.41	249	12.1	16.3	20	80	74	38	142.3
1930	19,640	242	15	61.16	227	11.6	16.3	16	75	60	31	128.1
1931	19,940	219	14	63.9	205	10.3	15.8	15	73.2	66	29	132.4
1932	19,740	263	8	30.4	255	12.9	15.3	20	78.4	65	28	106.4
1933	19,670	213	8	37.6	205	10.4	14.4	10	48.4	64	18	84.5
1934	19,550	266	16	64.00	250	12.78	14.8	15	64.00	59	31	116.6
1935	19,510	258	21	81.40	237	12.15	14.7	9	37.97	57	30	116.3
1936	19,430	231	7	30.30	224	11.53	14.8	19	84.82	59	26	112.1
1937	30,120	425	18	42.35	407	13.51	14.9	17	41.77	58	35	82.4
1938	30,140	453	19	41.94	434	14.4	15.1	20	46.08	53	39	86.1
1939	29,900	441	19	43.08	422	14.1	15.0	17	40.28	50	36	81.6
1940	29,540	365	11	30.10	354	11.98	14.6	27	76.27	55	38	104.1
1941	29,680	407	16	39.31	391	13.17	14.2	29	74.16	59	45	110.5
1942	29,170	458	10	21.83	448	15.35	15.8	20	44.64	49	30	65.5
1943	28,500	474	6	12.66	468	16.42	16.5	20	42.73	49	26	54.8
1944	27,840	519	15	28.9	504	18.10	17.6	29	57.54	46	44	84.78
1945	27,540	420	6	14.29	414	15.03	16.1	13	31.4	46	19	45.24
1946	29,810	516	13	25.19	503	16.87	19.1	17	33.79	43	30	57.95
1947	30,350	572	22	38.46	550	18.12	20.5	22	40.00	41	44	76.92
1948	30,810	524	14	26.72	510	16.55	17.9	20	39.22	34	34	64.88
1949	30,760	514	9	17.51	505	16.45	16.7	12	23.76	32	21	40.86
1950	30,710	461	6	13.02	455	14.81	15.8	11	24.22	30	17	36.88
1951	30,500	463	13	28.0	450	14.75	15.5	11	24.44	30	24	51.84
1952	30,420	413	9	21.8	404	13.3	15.3	9	22.3	28	18	43.58
1953	30,370	414	6	14.5	408	13.4	15.5	10	24.5	27	16	38.65
1954	30,400	421	8	19.0	413	13.6	15.2	11	26.6	26	19	45.11
1955	30,360	412	6	14.6	406	13.4	15.0	9	22.2	25	15	36.41
1956	30,490	445	7	15.7	438	14.4	15.7	14	32.0	24	21	47.19

TABLE 20

ANNUAL DEATHS FROM SPECIFIED CAUSES IN BRIGHOUSE SINCE THE INCORPORATION OF THE BOROUGH, 1894.

Year	Population	Maternal Deaths			Number of Deaths from Various Causes and Rates per 1,000 of Population																					
		Puerperal Sepsis	Other Puerperal	Total Death Rate per 1000 Total Births	Typhoid and Paratyphoid Fever		Smallpox		Measles		Scarlet Fever		Whooping Cough		Diphtheria		Influenza		Cancer		Tuberculosis						All Causes	
																					Lungs		Other		Total			
					No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate
1894	21,043				5	0.24	—	0.00	4	0.19	1	0.05	13	0.61	4	0.19	7	0.33	13	0.61	36	1.71	7	0.33	43	2.04	312	14.6
1895	21,153				3	0.14	—	0.00	13	0.62	1	0.05	3	0.14	3	0.14	—	0.00	11	0.51	40	1.8	13	0.61	53	2.41	349	16.50
1896	21,238				2	0.09	—	0.00	16	0.75	3	0.14	6	0.28	—	0.00	—	0.00	14	0.65	40	1.74	3	0.14	43	1.88	360	17.00
1897	21,347				3	0.14	—	0.00	4	0.19	5	0.24	10	0.46	1	0.05	11	0.51	10	0.46	32	1.36					322	15.08
1898	21,466				4	0.24	—	0.00	12	0.56	3	0.14	1	0.05	2	0.09	1	0.05	17	0.79	41	1.72					418	17.60
1899	21,570				2	0.09	—	0.00	—	0.00	9	0.41	3	0.14	1	0.05	6	0.28	15	0.70	33	1.41					371	17.10
1900	21,690	—	2	3.89	2	0.09	—	0.00	10	0.46	7	0.32	13	0.60	6	0.28	—	0.00	15	0.70	39	1.82	12	0.56	51	2.38	399	18.39
1901	21,780	—	3	5.81	3	0.14	—	0.00	2	0.09	1	0.05	—	0.00	12	0.55	—	0.00	14	0.65	43	1.88					345	15.84
1902	21,960	—	2	4.06	1	0.05	2	0.09	14	0.65	2	0.09	5	0.23	7	0.31	2	0.09	9	0.41	33	1.50	9	0.41	41	1.91	305	13.88
1903	21,983	—	4	3.99	—	0.00	1	0.05	6	0.28	2	0.09	6	0.28	—	0.00	4	0.18	10	0.45	27	1.23	5	0.23	32	1.46	258	11.73
1904	22,076	—	—	0.00	—	0.00	1	0.05	—	0.00	3	0.13	5	0.23	1	0.05	4	0.18	21	0.95	43	1.94	13	0.59	56	2.43	305	13.81
1905	22,100	—	3	6.60	—	0.00	—	0.00	5	0.23	1	0.04	—	0.00	4	0.18	4	0.18	20	0.90	30	1.35	9	0.41	39	1.76	268	12.11
1906	22,196	—	5	10.86	2	0.09	—	0.00	7	0.31	7	0.31	4	0.18	1	0.05	1	0.04	21	0.94	27	1.21	13	0.58	40	1.79	312	14.50
1907	22,280	—	1	2.37	1	0.05	—	0.00	—	0.00	—	0.00	9	0.39	9	0.39	5	0.22	15	0.67	25	1.12	6	0.26	31	1.38	298	13.37
1908	22,365	—	1	2.21	—	0.00	—	0.00	14	0.63	—	0.00	—	0.00	10	0.45	6	0.26	20	0.89	31	1.38	11	0.49	42	1.87	320	14.30
1909	22,455	—	2	7.29	3	0.14	—	0.00	1	0.04	2	0.09	8	0.35	5	0.22	7	0.31	16	0.71	26	1.15	5	0.22	31	1.37	283	12.60
1910	22,520	—	3	7.46	1	0.05	—	0.00	11	0.48	1	0.04	5	0.22	4	0.18	2	0.09	27	1.20	24	1.06	10	0.44	34	1.50	264	11.72
1911	20,843	1	1	5.44	1	0.05	—	0.00	—	0.00	—	0.00	2	0.10	3	0.14	3	0.14	14	0.67	24	1.14	10	0.48	34	1.62	258	12.53
1912	20,900	1	1	5.57	2	0.10	—	0.00	2	0.10	3	0.15	3	0.15	1	0.05	—	0.00	25	1.19	27	1.24	9	0.43	36	1.67	294	14.06
1913	20,960	1	2	8.04	1	0.05	—	0.00	—	0.00	—	0.00	—	0.00	1	0.05	1	0.05	18	0.85	39	1.91	6	0.28	45	2.19	284	13.55
1914	21,020	1	2	7.87	—	0.00	—	0.00	1	0.04	—	0.00	6	0.28	5	0.23	—	0.00	27	1.28	34	1.62	9	0.42	43	2.04	290	13.80
1915	21,100	1	2	8.69	—	0.00	—	0.00	31	1.43	1	0.04	—	0.00	15	0.71	4	0.17	18	0.89	22	1.04	11	0.52	33	1.56	331	16.40
1916	19,748	1	1	5.79	—	0.00	—	0.00	2	0.10	—	0.00	2	0.10	8	0.38	4	0.17	30	1.51	27	1.42	12	0.60	39	2.02	316	16.05
1917	19,332	1	2	10.16	1	0.05	—	0.00	2	0.10	1	0.05	—	0.00	1	0.05	8	0.38	19	1.03	19	0.93	12	0.60	31	1.53	299	15.51
1918	19,364	1	1	6.57	—	0.00	—	0.00	3	0.15	—	0.00	15	0.77	2	0.10	59	3.04	22	1.13	32	1.65	7	0.35	39	2.00	373	19.26
1919	21,000	—	2	6.82	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	28	1.39	20	0.99	26	1.31	6	0.29	32	1.59	295	14.60
1920	20,871	—	—	0.00	—	0.00	—	0.00	7	0.33	1	0.05	—	0.00	3	0.14	4	0.19	28	1.34	23	1.10	5	0.24	28	1.34	271	12.98
1921	20,610	—	—	—	1	0.05	—	0.00	—	0.00	1	0.05	3	0.14	2	0.10	7	0.34	19	0.91	19	0.91	7	0.34	26	1.25	263	12.76
1922	20,670	—	2	6.04	—	0.00	—	0.00	—	0.00	1	0.05	1	0.05	1	0.05	19	0.92	25	1.21	18	0.87	6	0.29	24	1.16	265	12.82
1923	20,390	1	1	7.01	—	0.00	—	0.00	1	0.05	—	0.00	3	0.15	—	0.00	9	0.44	21	1.03	21	1.03	6	0.29	27	1.32	272	13.33
1924	20,100	—	1	3.38	—	0.00	—	0.00	—	0.00	4	0.19	3	0.15	2	0.09	23	1.14	28	1.38	23	1.14	7	0.34	30	1.48	283	14.08
1925	19,920	1	2	10.20	1	0.05	—	0.00	7	0.35	1	0.05	1	0.05	—	0.00	10	0.50	35	1.81	17	0.85	6	0.30	23	1.15	314	15.70
1926	19,440	—	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	2	0.10	10	0.51	36	1.85	20	1.02	5	0.25	25	1.27	257	13.2
1927	19,380	—	1	3.90	—	0.00	—	0.00	2	0.10	—	0.00	—	0.00	1	0.05	25	1.29	34	1.75	20	1.02	6	0.31	26	1.33	297	15.3
1928	19,460	—	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	1	0.05	6	0.31	20	1.03	17	0.87	4	0.20	21	1.07	243	12.5
1929	19,640	—	1	4.01	1	0.05	—	0.00	—	0.00	—	0.00	1	0.05	—	0.00	24	1.22	36	1.83	18	0.91	6	0.30	24	1.21	308	15.7
1930	19,640	—	2	8.80	2	0.10	—	0.00	—	0.00	2	0.10	2	0.10	1	0.05	3	0.15	39	1.98	13	0.66	1	0.05	14	0.71	266	13.5
1931	19,940	—	1	4.60	—	0.00	—	0.00	—	0.00	—	0.00	1	0.05	2	0.10	5	0.25	35	1.75	15	0.75	6	0.30	21	1.05	273	13.7
1932	19,740	1	1	7.60	—	0.00	—	0.00	—	0.00	—	0.00	1	0.05	1	0.05	13	0.65	31	1.57	12	0.61	2	0.10	14	0.71	266	13.4
1933	19,670	—	1	4.70	1	0.05	—	0.00	—	0.00	1	0.05	1	0.05	1	0.05	10	0.58	35	1.74	12	0.61	1	0.05	13	0.66	283	14.4
1934	19,550	1	3	15.04	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	2	0.10	3	0.15	40	2.05	11	0.56	2	0.10	13	0.66	274	14.0
1935	19,510	—	1	3.88	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	—	—	3	0.15	38	1.90	11	0.56	2	0.10	13	0.66	247	12.7
1936	19,430	3	—	12.99	—	0.00	—	0.00	—	0.00	2	0.10	2	0.10	3	0.15	4	0.20	38	1.96	8	0.41	4	0.20	12	0.61	294	15.13
1937	30,120	1	—	2.35	—	0.00	—	0.00	—	0.00	1	0.03	1	0.03	2	0.07	24	0.79	55	1.83	17	0.56	4	0.13	21	0.69	447	14.84
1938	30,140	—	1	2.21	1	0.03	—	0.00	—	0.00	1	0.03	—	0.00	—	0.00	3	0.09	52	1.73	10	0.33	4	0.13	14	0.46	404	13.4
1939	29,900	2	—	4.53	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	1	0.03	4	0.13	61	2.04	14	0.47	3	0.10	17	0.57	476	15.92
1940	29,540	—	—	0.00	—	0.00	—	0.00	2	0.07	—	0.00	—	0.00	—	0.00	9	0.30	47	1.59	10	0.34	4	0.14	14	0.47	462	15.67
1941	29,680	—	1	2.46	—	0.00	—	0.00	—	0.00	—	0.00	2	0.06	—	0.00	5	0.16	56	1.88	14	0.40	3	0.07	17	0.40	446	15.02
1942	29,170	—	1	2.18	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	2	0.07	3	0.10	47	1.61	13	0.44	5	0.17	18	0.62	394	13.5
1943	28,500	1	4	10.55	—	0.00	—	0.00	—	0.00	—	0.00	4	0.14	—	0.00	16	0 56	77	2.70	15	0.54	1	0.03	16	0.55	467	16 38
1944	27,840	1	—	1.93	—	0.00	—	0 00	—	0.00	—	0.00	2	0.07	2	0.07	1	0.03	52	1.87	12	0.43	2	0.07	14	0.50	403	14.47
1945	27,540	—	1	2.38	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	2	0.07	65	2.36	12	0.43	1	0.04	13	0.47	418	15. 8
1946	29,810	—	—	0.00	1	0.03	—	0 00	—	0.00	—	0.00	1	0.03	—	0.00	3	0.10	72	2.42	12	0.40	1	0.03	13	0.43	430	14.42
1947	30,350	—	1	1.75	—	0,00	—	0,00	1	0,03	—	0,00	—	0,00	—	0.00	1	0.03	55	1.81	13	0.43	1	0,03	14	0.46	422	13,90
1948	30,810	—	—	—	—	0.00	—	0.00	—	0.00	—	0.00	1	0,03	—	0,00	—	0.00	63	2.04	13	0.42	2	0.06	15	0.48	437	14.18
1949	30,760	—	—	—	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	13	0.42	65	2.11	15	0.49	2	0.06	17	0 55	433	14.08
1950	30,710	—	—	—	—	0.00	—	0.00	—	0.00	—	0.00	1	0.03		0.00	2	0.06	79	2.24	1	0.03	2	0.06	3	0.09	430	14.00
1951	30,500	—	1	2.16	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	13	0.42	56	1.83	7	0.23	1	0 03	8	0.26	453	14.85
1952	30.420	—	—	—	—	0.00	—	0.00	—	0.00	—	0.00	—	0.03	—	0.00	—	0.00	74	2.10	4	0.13	—	0.00	4	0.13	88	12.8
1953	30,370	—	—	—	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	3	0.10	59	2.01	8	0. 6	—	0.00	8	0.26	394	1 .0
1954	30,400	—	—	—	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	1	0 03	54	1.77	2	0.07	—	0.00	2	0.07	370	12.2
1955	30,' 60	—	—	—	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	1	0.03	61	2.01	1	0.03	—	0.00	1	0.03	396	13.04
19 6	30,490	—	—	—	—	0,00	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	2	0.07	47	1.54	5	0.16	—	0.00	5	0.16	395	13.0

ANNUAL REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR, PUBLIC CLEANSING AND SALVAGE OFFICER FOR THE YEAR 1956

TO HIS WORSHIP THE MAYOR, ALDERMEN AND COUNCILLORS OF THE BOROUGH OF BRIGHOUSE

I have pleasure in submitting the Annual Report on the Environmental Health and Public Cleansing Services for the year 1956. As is customary, the portion of the report dealing with the former service is in respect of the calendar year while that in respect of the Cleansing Service is in respect of the financial year ending 31st March, 1957.

After 31 years as your Chief Public Health Inspector and Cleansing Superintendent, Mr. C. R. Moss, M.B.E., took his leave of the Council, upon retirement – at least from the Local Government Service – on the 8th November and the report is largely, therefore, based on the work carried out during his tenure of office.

For some years there has been a shortage of Public Health Inspectors and while it did not effect the working of the Department in the year under review, this shortage is doing so at the time of writing this report as the Department will be deficient of one member of its technical staff for most of 1957. This has a serious effect on the routine work of the Department at a time when the duties for which it is responsible have increased considerably with the new Food and Clean Air law and the resumed Slum Clearance drive – all of which require very considerable numbers of routine inspections if they are to be carried out efficiently.

I wish to record my appreciation of the technical work performed by the Public Health Inspectors, and my thanks to the clerks of the Department, to the Foreman/Engineer and all the employees of the Cleansing Department each one of whom plays an important role in maintaining and improving the environmental conditions in the town.

Finally I should like to thank the Chairman, Vice-Chairman and Members of the Health and Cleansing Committee for their confidence and support since my return to Brighouse, also Dr. Appleton for his help and encouragement.

I am Mr. Mayor, Lady and Gentlemen,

Your obedient servant,

W. JENNINGS,

Chief Public Health Inspector,
Public Cleansing and Salvage Officer.

SANITARY INSPECTION OF DISTRICT

(A)—Inspections

Total number of Inspections	8,051
Atmospheric Pollution Gauges — Visits	94
Caravans Inspected	12
Complaints Investigated	445
Drainage Inspections	117
Diseases of Animals Acts — Visits	14
Dwellinghouses Inspected :—	
Dwellinghouses Inspected and Recorded	176
Housing Acts — Overcrowding Survey	10
Public Health Acts	1,117
Dwellinghouses Re-inspected :—	
Housing Acts — Re-inspections	488
Public Health Acts	1,500
Disinfections	8
Disinfestations	12
Drains tested with water	1
Drains tested with smoke	14
Drains tested with colour	154
Factories Inspected	47
Food Hawkers	36
Food Preparing Premises	251
Food Shops	404
Fried Fish Shops	50
Licensed Premises	58
Bakehouses Inspected	79
Butcher's Shops Inspected	99
Dairies and Distributors of Milk	71
Ice Cream Premises Inspected :—	
Manufacture	36
Retail	38
Markets Inspected	56
Slaughterhouses	590
Hairdressers and Barbers	12
Hydrogen Cyanide Regulations :—	
Premises Treated	1
Infectious Diseases	23
Offensive Trades :—	
Fish Meal Premises	28
Tripe Boiling Premises	1
Prevention of Damage by Pests :—	
Inspections	173
Re-inspections	45
Public Cleansing Service	677
Public Conveniences	286
Rag Flock and Other Filling Materials Act :—	
Inspections	1

Shops Act, 1950	32
Smoke Observations	207
Works in Progress	54
Boiler Plant Inspections	3
Fat Rendering Premises	2
Miscellaneous Visits	514
Pet Animals Act, 1951 :—	
Inspections	2

(B)—Summary of Repairs and Sanitary Improvements Effected, 1956

Interior of Houses

Food stores provided or ventilated	3
Burst water pipes repaired	25
Defective floors repaired or relaid	12
Light and/or ventilation of rooms improved	4
Doors renewed or repaired	3
Fireplaces renewed or repaired	8
Glazed sinks renewed or provided in lieu of stone sinks	13
Sash cords renewed or provided	25
Ceilings underdrawn	1
Walls and ceilings replastered	18
Steps taken to combat dampness	10
Water gaining access to cellars abated	1
Window frames renewed or repaired	9
Handrails provided to staircases	11

Exterior of Houses

Chimney stacks repaired	5
Defective chimney pots renewed or cowls provided	2
Eavesgutters renewed or repaired	32
Leaky roofs repaired	43
Mastic pointing renewed	9
Rainwater pipes disconnected from drains	2
Rainwater pipes renewed or repaired	12
Choked cellar window area remedied	1
Walls repointed	10
Boundary wall repointed and made safe	1
Yard paving repaired or renewed	4
Outbuildings repaired	2
Offensive accumulations removed	6
Nuisance from keeping of animals abated	1

Drainage

Drainage pump repaired	1
Additional gullies provided	1
Drains and sewers repaired or renewed	22
Drains and sewers cleansed from obstruction	56

Waste pipes repaired or renewed	3
Soil pipes renewed	2
Sanitary Conveniences	
Flushing cisterns repaired	7
Pail closets and privies converted to fresh water closets	4
Waste water closets converted to fresh water closets	1
Water closet pedestals put into proper order or renewed	19
W.C. floors repaired or relaid	3
W.C. walls repaired	3
Roofs of W.C. repaired	2
Water supply to W.C.'s re-provided	6
Doors of W.C.'s repaired or renewed	2
House Refuse Accommodation	
Dilapidated dustbins renewed	247

WATER

Public Water Supply

The Borough of Brighouse is supplied with water from the Halifax Corporation Reservoirs, and during the year under review regular routine samples for Bacteriological Examination were taken from the various Wards in the Borough with the following results:—

Ward	Number of Samples Submitted	Number Satisfactory	Number Unsatisfactory
Central	1	1	—
Clifton	2	2	—
Hipperholme	2	2	—
Hove Edge	1	1	—
Longroyde	1	1	—
Lightcliffe	1	1	—
Southowram	4	4	—
Woodhouse	2	2	—
Totals	14	14	—

Private Water Supplies

During the year samples were also taken from private wells and springs in the Borough with the following results :—

Situation	Number Submitted	Number Satisfactory	Number Unsatisfactory
Rawsons Arms Hotel, Elland	1	1	—
Sunny Bank Farm, Southowram	1	1	—
Totals	2	2	—

Examination for Plumbo-Solvency

Two samples of water were submitted during the year for special examination for plumbo-solvency, details of the examinations were as follows :—

Supply	Date Sample Collected	Address at which Collected	Approx. length of Lead Service Pipe	Result of Examination	
				Lead contents (Grains per Gal.)	pH value
After standing in pipe for measured period of ½ hr.	13.3.56	11 Frances St. Brighouse	12 ft.	Nil	6.4
After standing in pipe all night	13.3.56	do.	12 ft.	Nil	6.4
After standing in pipe for measured period of ½ hr.	24.9..56	234 Wake-Rd. Lightcliffe	16 ft.	Nil	7.1
After standing in pipe all night	24.9..56	do.	16 ft.	Nil	7.3

FOOD INSPECTION AND SUPERVISION

Milk Supply

Registration and Licensing

There are 65 names on the Register of Distributors of Milk.

At the end of the year there were on the Register :—

25 Dealers and 8 Supplementary Licences for the sale of "Pasteurised" Milk.

24 Dealers and 8 Supplementary Licences for the sale of "Tuberculin Tested" Milk.

48 Dealers and 4 Supplementary Licences for the sale of "Sterilised" Milk.

Bacteriological Examination of Milk

During the year 165 samples of milk were taken in the Borough by the Officers of this Department for examination at the Public Health Laboratory, Wakefield. These samples were submitted for examination by the Phosphatase, Methylene Blue and Turbidity Tests with the following results :—

TYPE OF MILK	Methylene Blue Test		Phosphatase Test		Turbidity Test	
	Sat.	Unsat.	Sat.	Unsat.	Sat.	Unsat.
"Tuberculin Tested" ...	78	21	—	—	—	—
"Pasteurised"	31	—	31	—	—	—
"T.T. Pasteurised" ...	28	—	28	—	—	—
"Sterilised"	7	—	—	—	7	—
Totals	144	21	59	—	7	—

Biological Examination of Milk

Twenty samples of Tuberculin Tested Milk were submitted for biological examination and all were reported as being free from Bacillus Tuberculosis.

Chemical Examination of Milk

The work in connection with the sampling of milk is administered by the West Riding County Council's Inspector and myself, the County Council bearing the cost of sampling and also providing any legal assistance necessary.

Sixty-four samples were submitted for analysis, all of which were formal samples.

Three samples were classified as genuine although they were below the minimum standard of solids not fat.

Sixty-one remaining samples were classified as genuine.

	Total Solids	Solids not fat	Milk Fat
Formal Standard	11.50	8.50	3.00
Average of 61 genuine samples	12.42	8.84	3.58
Other genuine samples	11.55	8.38	3.17

Meat Inspection

The Co-operative Wholesale Society continued to use the Abattoir of the Brighouse Co-operative Society and at least one other wholesaler also had his animals slaughtered there. This is the only slaughterhouse in the Borough now licensed under the Food and Drugs Act, 1955.

During the year 590 visits were made to the slaughterhouse to inspect meat and, as is now very common elsewhere, slaughtering took place regularly on Sundays.

The following tables give details of animals slaughtered, of inspections and causes of condemnation. There was an increased incidence of Cysticercus Bovis, 32 cases being detected. All were local infestations.

Month	Cows	Beasts	Sheep	Pigs	Calves	Total
January	2	209	539	124	—	874
February	11	171	317	91	1	591
March	9	223	369	82	—	683
April	—	166	243	79	—	488
May	—	158	254	56	—	468
June	—	176	468	57	—	701
July	2	223	697	69	—	991
August	1	212	840	70	1	1,124
September	1	212	1,059	138	2	1,412
October	3	288	1,215	217	16	1,739
November	2	259	1,330	243	4	1,838
December	3	260	1,114	323	4	1,704
Totals ...	34	2,557	8,445	1,549	28	12,613

Carcases and Offal Inspected and Condemned in whole or in part

	Cattle excld'g Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed	2,557	34	28	8,445	1,549	—
Number inspected	2,557	34	28	8,445	1,549	—
All diseases except Tuberculosis and Cysticerci						
Whole carcases condemned...	1	Nil	2	5	2	—
Carcases of which some part or organ was condemned...	1,300	4	1	140	30	—
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci ...	50.9	11.8	10.7	1.7	2.1	—
Tuberculosis only						
Whole carcases condemned...	5	1	Nil	Nil	7	—
Carcases of which some part or organ was condemned...	184	8	Nil	Nil	11	—
Percentage of the number inspected affected with tuberculosis	7.4	26.5	Nil	Nil	1.2	—
Cysticercosis						
Carcases of which some part or organ was condemned...	32	Nil	Nil	Nil	Nil	—
Carcases submitted to treatment by refrigeration ...	24	Nil	Nil	Nil	Nil	—
Generalised and totally condemned	Nil	Nil	Nil	Nil	Nil	—

List of Unsound Meat Condemned and Surrendered at the C.W.S. Slaughterhouse, giving Weights and Causes of Condemnation in monthly order

Disease	Jan. lbs.	Feb. lbs.	Mar. lbs.	Apr. lbs.	May lbs.	June lbs.	July lbs.	Aug. lbs.	Sep. lbs.	Oct. lbs.	Nov. lbs.	Dec. lbs.	Totals lbs.
Abscesses	28	2	47	139	160	50	63	76	63	161	141½	86	1,016½
Actinobacillosis ...	—	—	61	—	30	—	30	—	28	—	30	60	239
Actinomycosis	32	30	32	—	—	—	—	—	—	30	—	35	159
Angiomatosis	21	14	13	—	—	—	—	—	—	—	—	—	48
Atrophy	—	—	—	—	—	—	—	—	1	—	—	—	1
Bacterial Necrosis ...	—	—	—	—	—	—	—	—	14	—	—	—	14
Bruising	20	—	169	230	—	—	20	14	104	13	—	82	652
Cirrhosis	1,159	661	611½	494	133	722	945	986	852	868	757½	895	9,084
Contamination	—	—	3	—	—	—	—	—	—	—	—	—	3
Cysticercus Bovis ...	—	30	66	—	—	70	97	145	93	200	28	113	842
Decomposition	—	—	10½	—	—	20	—	—	—	7	—	14	51½
Distomatosis	27	19	—	2	—	2	12	—	26	8	8	11	115
Dropsy	—	—	—	—	—	—	—	—	—	—	87	—	87
Emaciation	—	—	—	87	—	—	—	—	22	—	—	—	109
Enteritis	—	—	25	—	—	—	—	—	—	—	—	—	25
Fatty Degeneration ...	—	48	—	12	—	—	66	—	14	12	—	12	164
Fever	—	—	—	—	—	—	43	—	—	49	—	—	92
Immaturity	—	—	—	—	—	—	—	—	—	—	24	33	57
Inflammation	—	—	—	—	17	—	11	—	—	5	55	31	119
Mastitis	26	30	—	—	—	—	—	—	—	—	—	—	56
Melanosis	32	—	—	14	—	—	—	—	—	1½	—	—	47½
Moribund	—	—	—	—	—	—	200	—	—	—	—	—	200
Parasitic Infes.	—	—	2	—	3	3	10	15	1½	1	10	18½	64
Pericarditis	9	—	—	—	—	18	1	—	21	2	14	8	73
Pleurisy	—	—	—	—	—	—	6	—	3	—	—	—	9
Pneumonia	—	—	—	—	2	—	—	—	—	—	—	—	2
Swine Erysipelas ...	—	—	—	—	—	—	—	—	—	—	121	—	121
Trauma	—	7	—	—	—	—	30	—	—	—	27½	—	64½
Tuberculosis	276	1,342	511	782	306	390	2,161	194	301	1,876	402	942	9,483
Totals ...	1,630	2,183	1,541	1,760	651	1,285	3,695	1,430	1,543½	3,233½	1,705½	2,340½	22,998

Total Weight: 10 tons 5 cwts 1 qtr. 10 lbs.

Slaughter of Animals Acts, 1933-54

Eighteen persons are licensed to slaughter animals under the Slaughter of Animals Acts, 1933-54. None of the licences extend to the slaughter of horses.

Food Hygiene

The following tabulated list gives the numbers of the various types of food premises in the Borough :—

Bakers and Confectioners	33
Cafes and Canteens	55
Grocers and General Mixed Stores	115
Greengrocers	25
Retail Fishmongers	1
Wholesale Fishmongers	4
Fried Fish Fryers	37
Sweet and Ice Cream Retailers	24
Butchers	40
Sweet Manufacturers	1
Condiment Manufacturer	1
Tripe Dresser and Retailer	1
Flour Miller	1
Licensed Premises	54
Licensed Clubs	18
Ice Cream Manufacturers	2
Wholesale Delicatessen	1
Market Stalls (average)	11
Soft Drink Manufacturer	1
Total	425

During the year 79 visits were paid to bakehouses, 99 to butchers shops, 252 to food preparing premises, 58 to licensed premises, 50 to fried fish shops, 404 to other foodshops, and these, together with the visits paid to ice cream premises and the Market, made a total of 1,072 visits paid to food premises in 1956.

The Food Hygiene Regulations, 1955, came into force, partly on 1st January and partly, on 1st July, and the principal object of the 1,072 routine visits was to explain this new legislation and to secure compliance therewith. The Department assisted occupiers of food premises with codes of practice for the various food trades and notices relative to handwashing and smoking.

A list of some of the improvements in food premises and food handling secured during the year follows, but the list only gives the improvements effected as a result of written or verbal notification of offences and many more improvements resulted from suggestions of the Public Health Inspectors and from their informal discussions with occupiers of food premises :—

Protection of food from contamination provided or improved	12
First aid equipment provided	7
Retailing by unregistered food hawkers checked	3
Use of insanitary food rooms stopped	1
Use of unregistered unsatisfactory room for manufacture of meat products stopped	1
Defective walls or ceilings of food rooms repaired	4
Defective floors repaired	7
Food rooms cleansed or decorated	23
Water supply provided or improved	2
Hot water supply provided or improved	30
Insect infestation remedied	1
New sinks provided	12
Washing facilities provided or improved	17
Written notice to stallholder to display name, etc., complied with	1
Sanitary accommodation put in order	14
Accommodation for outdoor clothing provided	4
Equipment cleansed	2
Equipment repaired	2
Food Hawkers van improved	1
Windows renewed	3

Market

Fifty-six visits were made to the twice weekly open market. There was an average of 11 Food traders including 1 Butcher, 1 Fishmonger, 2 Biscuit Stalls, 1 Sweet Stall, 1 Cooked Meat Stall and the remainder Greengrocery Stalls. The standard of hygiene generally complied with that required by the Food Hygiene Regulations, 1955, though it was necessary to visit the market regularly to ensure that some Regulations were obeyed.

Food Hawking

Section 76, West Riding (General Powers) Act, 1951, is in force in the Borough and 20 persons or firms are registered to hawk food. 23 vans or carts are used for the purpose.

17 vehicles are used for hawking of greengrocery and fish.

2 vehicles are used for hawking of meat and meat products.

3 vehicles are used for hawking grocery and

1 vehicle is used for hawking Ice Cream.

During the year 36 visits of inspection were made to food hawkers while they were selling food in Brighouse area.

Unsound Food

The following unsound food was additional to that at the slaughterhouse, found unfit and surrendered by food traders :—

(a) Meat :—

90 lbs. Beef

(b) Fish :—

101½ lbs. Cod Fillets	430 lbs. Haddock Fillets

(c) Tinned and Bottled Food :—

3 tins Pork	20 tins Shrimps
4 tins Ham	1 tin Pilchards
8 tins Lucheon Meat	1 tin Apricots
11 tins Tongue	3 tins Pears
29 tins Stewed Steak	2 tins Strawberries
1 tin Jellied Veal	2 tins Cherries
26 tins Corned Beef	8 tins Peaches
11 tins Chopped Pork	8 tins Fruit Salad
1 tin Steak and Kidney Pie	74 tins Milk
	6 tins Cream
1 tin Chicken	30 tins Peas
1 tin Crawfish	7 tins Tomatoes
1 tin Tunafish	1 jar Tomato Chutney
4 tins Crab	

(d) Other Foods :—

40 lbs. Apples	36 pkts. Margarine

Unsound food other than meat is disposed of at the Council's Refuse Disposal Works.

Unsound meat condemned at the slaughterhouse remains the property of the C.W.S. Ltd., but is disposed of satisfactorily under the supervision of your Inspectors and after staining with acid green dye, as follows :—

(a) Livers affected by distomatosis only – to a local mink breeder.

(b) All other condemned meat – to an approved nearby firm dealing in inedible fats for digestion.

Registration of Food Premises —

Section 16 Food and Drugs Act, 1955

(a) Prepared Foods.

Thirty-three premises are registered for the preparation or manufacture of sausages, potted, pressed, pickled or preserved food intended for sale. In the light of the Food Hygiene Regulations, 1955, all registrations were reviewed during the year and a considerable amount of work was carried out to bring the premises into compliance with the new Regulations. The number of visits to the above premises and others where food is prepared was 251.

(b) Ice Cream

Sixty-three premises are registered under the above Act, 2 for the manufacture, storage and sale of Ice Cream and 61 for the storage and sale of Ice Cream.

Thirty-six routine inspections of the two ice cream manufacturers' premises, where the heat treatment process of manufacture

is carried out, revealed that conditions were satisfactory, the firms still being anxious to co-operate with us, 38 visits were made to Ice Cream Retailers.

A total of 42 samples of ice cream were submitted for the bacteriological examination by the Methylene Blue Reduction Test, and particulars are given below :—

Produced	No. of Samples	Grade I	Grade II	Grade III	Grade IV
In Borough ...	18	13	2	—	3
Outside Borough	24	23	1	—	—
Total ...	42	36	3	—	3

The 18 samples of ice cream produced in the Borough were obtained direct from the manufacturers' premises. One routine sample taken in December was placed in Grade 4 and the two grade 2 results and other two grade 4 results were those of samples taken during the subsequent sampling at the plant. After dismantling and thoroughly cleansing subsequent samples again produced grade 1 results.

(c) Iced Lollies

Eleven samples of iced lollies, all produced locally, were submitted for bacteriological examination and all were reported as showing no coliforms in 3/3 millilitre amounts.

Sampling of Foodstuffs other than Milk and Ice Cream

(a) Synthetic Cream

In order to encourage greater hygiene in the preparation of synthetic cream, sampling of cakes containing synthetic cream was undertaken during the year and 68 samples were obtained from local shops where preparation was carried on by the same firm as the one retailing the cakes.

Pathogenic organisms (staph. aureus) were isolated from 3 samples.

Thirteen samples contained no coliforms. 20 samples had colony counts of less than 5,000 per gram, 12 counts of between 5,000 and a million. 25 counts of between one and fifty million and eleven had counts of over fifty million.

Results were indicated to the baker-retailers.

(b) Other Foods :—

Eight samples of other foods as given below were submitted for routine bacteriological examination.

3 samples of Crab Meat were satisfactory.

5 samples of Mussels were satisfactory.

ATMOSPHERIC POLLUTION

(i) Smoke Observations

Two hundred and seven timed half-hour observations were taken during 1956. The following table gives the details of the observations taken :—

Number of chimneys of which observations have been taken	51
Number of observations taken	207
Average number of minutes black smoke during the above obversations	0.137
Average number of minutes smoke other than black smoke during the 207 observations	5.30
Number of observations showing black smoke	15
Average number of minutes black smoke during the above 15 observations	1.9
Number of observations showing black smoke exceeding 3 minutes in every 30	4
Average number of minutes black smoke during the above observations	5
Number of Notices of Offence served	4

(ii) Measurement of Atmospheric Pollution

Details of the atmospheric pollution gauges and the measurement of sulphur dioxide with the lead peroxide instruments are given on pages 19 and 20. Comparison with the three previous years are as follows :—

	Total Solids in Tons per Square Mile			
	1956	1955	1954	1953
Wellholme Park	169.25	159.40	159.31	145.62
Rastrick (Carr Green) ...	185.49	147.18	144.20	117.64
King George V Park, Lightcliffe	172.26	116.17	125.93	*127.74
Southowram	151.97	116.63	141.77	118.40
Clifton	†129.29	144.40	*105.73	129.19

† Refers to 11 months only * Refers to 9 months only

(iii) Legislation

The Clean Air Act, 1956 became law in July and portions became operative in December. These related principally to prior approval for new furnaces, the power to make a byelaw regarding smokeless appliances in new houses and the authority for Local Authorities to establish Smoke Control areas. It is hoped to make progress in 1957 to operate this new legislation.

Deposited Atmospheric Pollution, 1956

	Wellholme Park				Carr Green				Cliffe Hill School				Southowram Church				Clifton: Towngate			
	Rainfall Inches	Insoluble Solids	Soluble Solids	Total Solids	Rainfall Inches	Insoluble Solids	Soluble Solids	Total Solids	Rainfall Inches	Insoluble Solids	Soluble Solids	Total Solids	Rainfall Inches	Insoluble Solids	Soluble Solids	Total Solids	Rainfall inches	Insoluble Solids	Soluble Solids	Total Solids
January ...	4.08	5.58	8.80	14.38	3.76	5.98	6.26	12.24	4.20	4.30	10.20	14.50	4.28	3.28	6.06	9.34	3.36	5.20	7.71	12.91
February ...	1 04	4.31	5.97	10.28	0.20	2.68	1.03	3.71	0.72	2.82	6.01	8.83	1.00	3.48	6.43	9.91	0.48	2.80	2.90	5.70
March	1.20	16.79	19.85	36.64	1.08	13.17	38.65	51.82	1.16	9.73	14.16	23.89	1.16	19.42	14.18	33.60	NO REPORT			
April	2.28	8.00	3.78	11.78	3.12	7.05	5.57	12.62	3.12	5.97	5.94	11.91	1.52	2.09	4.41	6.50	2.80	8.59	4.61	13.20
May	0 68	5.74	2.69	8.43	0.76	4.99	2.48	7.46	0.68	3.62	2.52	6.14	0.24	2.32	1.72	4.04	0.60	6.12	5.99	12.11
June	2.44	9.03	9.06	18.09	2.68	5.06	6.19	11.25	2.36	22.45	7.25	29.70	2.60	5.00	7.29	12.29	2.36	3.19	5.14	8.33
July	4.96	6.21	6.13	12.34	5.40	5.81	6.19	12.00	5.00	8.69	7.01	15.70	5 24	2.95	6.03	8.98	4.68	4.42	9.58	14.00
August ...	6.52	1.49	11.62	13.11	6.92	1.13	7.91	9.04	6.84	3.22	10.47	13.69	6.80	0.70	10.40	11.10	6.40	2.47	8.17	10.64
September ...	3.48	5.01	8.00	13.01	3.60	8.39	12.90	21.29	3.44	4.83	6.54	11.37	3.64	8.12	10.21	18.33	3.32	2.24	13.04	15.28
October ...	1.60	3.95	5.54	9.49	1.60	3.47	11.14	14.62	1.84	3.15	11.04	14.19	1.60	2.35	12.96	15.31	1.20	3.36	6.06	9.42
November ...	1.00	1.43	6.57	8.00	0.96	2.68	15.10	17.78	1.00	3.56	6.49	10.05	0.92	2.82	8.48	11.30	1.00	2.90	7.51	10.41
December ...	3.64	6.27	7.43	13.70	2.76	4.92	6.74	11.66	2.48	4.40	7.89	12.29	3.00	3.58	7.69	11.27	3.00	7.74	9.55	17.29
Yearly Aggregate	32.92	73.81	95.44	169.25	33.84	65.33	120.16	185.49	32.84	76.74	95.52	172.26	32.00	56.11	95.86	151.97	29.20	49.03	80.26	129.29
Monthly Averages	2.74	6.15	7.95	14.10	2.82	5.44	10.01	15.45	2.73	6.38	7.96	14.35	2.66	4.67	7.98	12.66	2.47	4.45	7.29	11.75

Monthly Average for whole Borough:

Rainfall in inches	2.68
Insoluble Solids	5.42
Soluble Solids	8.24
Total Solids	13.66

Total Annual Deposit for whole Borough: 161.65 tons per square mile

Sulphur Pollution — Lead Peroxide Method 1956

STATION	Milligrams of SO_3 per 100 sq. cms. per day 1956												
	Jan.	Feb.	Mar.	Apr.	May	Jne.	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total Daily Av'ge
Wellholme Park	2.51	1.92	1.97	1.78	1.13	0.13	0.71	0.94	1.52	1.46	1.67	2.53	1.52
Carr Green	1.68	1.31	1.62	1.71	1.08	0.75	0.69	0.76	0.91	1.48	1.82	2.23	1.34
Cliffe Hill School	3.09	1.69	1.70	2.06	1.44	0.82	0.82	1.05	1.38	1.38	2.21	1.78	1.56
Southowram Church	2.70	1.46	1.99	2.09	1.48	0.12	0.90	1.08	1.15	1.66	2.00	2.62	1.60
Clifton : Towngate	3.28	2.48	2.37	2.20	1.66	1.01	1.14	1.22	1.36	1.97	2.41	2.70	1.97
Total Daily Average ...	2.85	1.77	1.93	1.97	1.36	0.57	0.89	1.01	1.26	1.59	2.02	2.37	1.60

HOUSING

In July, 1956 the Official Representation was made to the Health and Cleansing Committee in respect of three Clearance Areas comprising 148 houses in Lillands Lane and Closes Road areas.

The Council accepted the Representation and made the following Clearance Order.

"Borough of Brighouse, Lillands Lane and Closes Road Clearance Order, 1956."

This was submitted to the Ministry of Housing and Local Government and at the end of the year the fixing of a date for a Public Enquiry was awaited – there having been some appeals against the Order.

As will be seen in Paragraph 3 (C) and (D) of the table immediately following these remarks, other Slum Clearance action was limited to the making of three official representations in respect of Individual Unfit houses, the acceptance of 5 undertakings not to relet houses and one Closing Order.

No action was taken under Section 9, Housing Act, 1936 this Section still being considered not practical where there are major items of unfitness in low rented houses due to the regard that must be paid to "reasonable expense."

A. Housing Statistics, 1956

1. Inspection of dwellinghouses during the year

(1)	(a)	Total number of dwellinghouses inspected for housing defects (under Public Health and Housing Acts)	495
	(b)	Number of inspections made for the purpose	1,117
(2)	(a)	Number of dwellinghouses (including under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations	133
	(b)	Number of inspections made for the purpose	176
(3)	(a)	Number considered to be in a state so dangerous or injurious to health as to be unfit for human habitation	158
	(b)	Number (excluding those in sub-head (3) (a) above) found not to be in all respects reasonably fit for human habitation	120

2. Remedy of defects during the year without service of formal notices

	(a)	Number of defective dwellinghouses rendered fit in consequence of informal action by the Local Authority or their officers	31

(b) Number of defective dwellinghouses (excluding those shown in (a) above) in which defects were remedied as a result of informal action 156

3. Action under Statutory Powers during the year

A. Proceedings under Section 9, 10 and 16 Housing Act, 1936

(1) Number of dwellinghouses in respect of which formal notices were served requiring repairs ..... —

(2) Number of dwellinghouses which were rendered fit after service of formal notices :—

(a) By owners .... —

(b) By Local Authority in default of owners ..... —

B. Proceedings under Public Health Acts

(1) Number of dwellinghouses in respect of which notices were served requiring defects to be remedied 53

(2) Number of dwellinghouses in which defects were remedied after service of formal notices :—

(a) By owners 30

(b) By Local Authority in default of owners ..... —

C. Proceedings under Section 11 and 13 of the Housing Act, 1936

(1) Number of representations, etc., made in respect of dwellinghouses unfit for habitation 3

(2) Number of dwellinghouses in respect of which Demolition Orders were made .... —

(3) Number of dwellinghouses demolished in pursuance of Demolition Orders 2

(4) Action under Sections 10 and 11 of the Local Government (Miscellaneous Provisions) Act, 1953 .... —

(5) Undertakings not to use for human habitation accepted 5

D. Proceedings under Section 12 of the Housing Act, 1936

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made 1

(2) Number of separate tenements or underground rooms, the Closing Orders in respect of which were determined, the tenement or room having been rendered fit 1

E. Proceedings under Part III of the Housing Act, 1936

(1) Number of Clearance Areas represented during the year 3

(2) Number of houses included in these areas 148

(3) Number of persons to be displaced	317
(4) Action taken during the year in respect of Clearance Areas :—	
(a) By Clearance Orders, number made	1
(b) By Compulsory Purchase Orders, number made	—
(5) Number of houses in Clearance Areas demolished during the year	16
(6) Number of persons re-housed from houses demolished during the year	5

4. Housing Act, 1936 (Part IV) — Overcrowding

Number of new cases of overcrowding reported during the year	23
(1) Number of cases of overcrowding relieved during the year	11
(2) Number of persons concerned in such cases	52

B. Improvement Grants – Housing Act, 1949

During the year 1956, 42 applications were considered by the Housing Committee for Improvement Grants. Each application is referred to the Chief Public Health Inspector, a detailed inspection of the house is made, and the properties are reported upon. Four of the applications were rejected and 38 applications were granted.

In November of the year under review the Council decided to cease to operate the scheme for a period of six months.

C. Certificates of Disrepair – Housing Repairs and Rents Act, 1954

One application for a Certificate of Disrepair under the provisions of Section 26 of the above was received during the year, and was granted by the Health and Cleansing Committee after submission of a report by your Chief Public Health Inspector.

No applications for revocation of disrepair certificates were received.

Together with the Improvement Grant Scheme the rent increases allowed by this Act were to be " Operation-Rescue " – the means of saving many old well built houses. While any workable scheme that will save the decaying property is welcomed by those who appreciate the tremendous problem and while a number of houses have been improved by means of grants, the larger core of unfit solidly built houses remains untouched by either of the above schemes and yearly they fall further into decay – a problem for owners, occupiers and Local Authorities.

PET ANIMALS ACT, 1951

Two persons were licensed to keep Pet Shops under this Act. One licence was in respect of a shop and one was for a Market Stall.

SHOPS ACT, 1950

Thirty-two visits were made to shops under the provision of the above Act. The new Food Hygiene Regulations now make specific requirements as regards sanitary accommodation in food shops and the large number of visits to food premises included inspections of the sanitary accommodation which have not been separately recorded. It will be noticed from reference to the Section of the report dealing with food hygiene that in 14 instances sanitary accommodation was put into proper order.

RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951

One premise was registered under the above Act for the use of rag flock as filling material for furniture manufacture, and one inspection was carried out during the year to the same. The premises have since been closed and do not now operate under the above Act.

One sample of rag flock was submitted for examination to the prescribed analyst and was found to be satisfactory. The result is set out below.

Test	Result	Permissible Amount
Chlorine in parts per 100,000	11	30
Oil and Soap	2.7%	5.0%
Soluble Impurities	0.834%	1.8%

DISEASES OF ANIMALS ACTS

One case of Anthrax and one case of Swine Fever were reported to your Council by Police Officers during the year.

Your Council being an authority for the above Acts, are responsible for the efficient disinfection of the premises and also for the disposal of affected carcases, and this was carried out in each of the above instances.

PUBLIC SWIMMING BATHS

Routine samples of the water in the Bathing Pool of the Public Swimming Baths, Mill Royd Street, were submitted during the year for Bacteriological Examination. The details of these are as follows :—

Month	Number Obtained	Number Satisfactory	Number Unsatisfactory
January	2	2	—
February	2	2	—
March	2	—	—
April	2	2	—
May	2	2	—
June	2	2	—
July	2	2	—
August	2	2	—
September	2	2	—
October	2	2	—
November	2	—	2
December	2	2	—
Totals ...	24	22	2

SANITARY ACCOMMODATION

The following table indicates the number of the various types of sanitary conveniences in the Borough at the end of the year :—

Fresh Water Closets	12,070
Waste Water Closets	40
Pail Closets	164
Privies	77

One waste water closet and four pails and privies were converted to fresh water closets during the year.

DRAINAGE

One hundred and seventeen inspections were paid during the year in connection with the repairs and reconstruction of drains to existing houses.

In 14 instances use was made of the smoke test, colour was resorted to in 154 instances, and the water test was applied on one occasion.

INFESTATION AND DISINFESTATION

The following premises were disinfested during the year :—

Infestation	Premises Treated
Fleas	1
Cockroaches	2
Plaster Beetles	2
Flies	1
Bugs	4
Snails	1
Crickets	1

In addition, during the summer, many houses in Field Lane Estate were affected by earwigs and Gooseberry Red Spider Mite and were treated by the Department or assistance given to the tenants in eradicating the pests.

INFECTIOUS DISEASE AND DISINFECTION

It was only necessary to make 23 visits for the purpose of investigating Infectious Disease.

The soft goods from one house were steam disinfected after Tuberculosis and 8 houses were disinfected after infectious disease, death or removals.

FACTORIES ACT, 1937

Seven complaints were received from H.M. Inspector of Factories.

One hundred and thirty-three inspections were paid to factories during the year, and the following defects were revealed and action taken :—

	Found	Remedied during year
Insufficient sanitary conveniences	2	—
Unsuitable or defective conveniences	6	5
Total	8	5

The following is a list of classified trades carried on in the Borough :—

Aerated Waters	1
Bakehouses	11
Bedding Manufacture	1
Blacksmiths	1
Boot and Shoe Repair	3

Brick Manufacture	4
Caravans	1
Card Clothing	4
Carpet Manufacture	4
Cattle Foods	1
Chaff Cutting	1
Clock Making and Repairs	1
Concrete Blocks	1
Coke Screening	1
Diecasting	1
Dress Making and Alteration	2
Dyers	6
Electrical Trades	2
Electro Plating	1
Engineering	19
Engraving	1
Fish Meal	1
Flour Milling	1
Food Preparation	7
Generation and Transforming of Electricity	4
Gasket and Packing Manufacture	1
Glazed Pipes	1
Gramophone Parts	2
Handbags	1
Ice Cream	1
Insulated Wires	1
Joinery and Cabinet Making	25
Leather Goods	1
Laundering	3
Machine Tools	5
Maltsters	3
Metal Spinning and Stamping	1
Metal Founding	7
Metal Skewers	1
Metal Spraying	1
Mortar Grinding	3
Motor Vehicle Repairs	22
Mustard Grinding and Packing	1
Oil Refining	1
Packing Manufacture	1
Packing Cases	1
Paint Manufacture	1
Patent Glazing	1
Pattern Making	3
Photography	3
Plumbing	4
Portable Buildings	1
Printing	2
Precast Concrete Blocks	1

Repairs to Open Cast Plant	1
Road Machinery Repairs	1
Road Tar and Antifreeze Compounds	1
Refuse Sorting and Tin Packing	1
Radio and Television	3
Rubber Pads — Horses	1
Rug Manufacture	1
Sauces	1
Sheet Metal Workers	6
Soap Manufacture	2
Spray Painting of Food Containers	1
Stone Trades	6
Sugar Confectionery	1
Textiles	44
Wire Drawing	6
Wire Goods	9
Wire Scourers	1
Wire Winding	1
Vent Bricks (Concrete)	1

Outworkers

There were 4 outworkers on the lists required to be submitted to the Council under Section 110 of the Factories Act. All were engaged in Textile Manufacture or repair.

OFFENSIVE TRADES

The following Offensive Trades are carried out in the Borough with the permission of the Council :—

Tripe Boiler	1
Soap Boilers	2

MOVEABLE DWELLINGS

Section 269, Public Health Act, 1936

Three sites were licensed for moveable dwellings :—

Broadholme, Mill Yard, Atlas Mill Road, Brighouse	3 caravans
Woomack Ltd., Atlas Mill Road, Brighouse	1 caravan
Parcel of land at Sunnyvale, Hipperholme	25 caravans

The land at Sunnyvale, which was first licensed during the year under review was not, in fact, used for moveable dwellings in 1956.

In addition the following sites were used by members of the Showmen's Guild :—

Land, Atlas Mill Road, Brighouse	6 caravans
Land at rear of Brighouse Cricket Club	8 caravans

HAIRDRESSERS AND BARBERS

Section 120, West Riding County Council (General Powers) Act, 1951, is in force in the district and all persons carrying on the trade of Hairdresser and Barber are required to register themselves and their premises with the Borough Council.

10 Gentlemen's Hairdressers,
23 Ladies Hairdressers and
1 Ladies and Gentlemen's Hairdressers

are registered. Twelve visits were paid to these premises with a view to ensuring compliance with your Council's Byelaws relative to hairdressing hygiene.

PREVENTION OF DAMAGE BY PESTS ACT, 1949

Work under the above Act has been continued on similar lines to previous years, this Department undertaking general work of rodent destruction and the Engineer's Department the destruction of rats in the Corporation sewers.

Free treatment is offered to occupiers of domestic property where there is co-operation with the department in eradicating the pests and treatments on payment are made for other occupiers.

A rodent operative is employed part time and in addition to survey work he has dealt with 145 infestations. For the most part Warfarin has been used for treatment and it continues to be a very satisfactory method of eradicating the pests.

The increased number of visits made to food premises has had its effect on the number of visits made in connection with rodent control as obviously freedom from vermin is an essential part of hygienic food premises.

The following table summarises the work carried out during the twelve months ended 31st March, 1957.

	TYPE OF PROPERTY				
	Non-Agricultural				
	Local Authority	Dwelling-houses including Council Houses	All other including Business Premises	Total of Cols. (1), (2) & (3)	Agricultural
1. Number of properties in Local Authority's District	46	11,364	1,553	12,963	99
2. Number of properties inspected as a result of:					
(a) Notification ...	3	102	35	140	3
(b) Survey under the Act	5	176	—	181	23
(c) Otherwise (e.g., when visited primarily for some other purpose) ...	—	—	414	414	—
3. Total inspections carried out including re-inspections	15	282	1,006	1,303	28
4. Number of properties inspected which were found to be infested by					
(a) Rats – Major ...	2	—	—	2	—
Minor ...	2	49	15	66	3
(b) Mice – Major ...	—	—	—	—	—
Minor ...	1	53	20	74	—
5. Number of infested properties treated by Local Authority ...	5	102	35	142	3
6. Total treatments carried out including re-treatments	13	113	55	181	5

PUBLIC CLEANSING SERVICE

The Health and Cleansing Committee is responsible for the cleansing of privy middens, dustbins, cesspools, and pail closets and for the collection and subsequent disposal of salvage, the cleansing and maintenance of sanitary conveniences and the humane destruction of domestic animals.

The Department is also entirely responsible for the maintenance and control of the Department transport.

(i) Storage

The following are types of receptacles in use at the 31st March, 1957 :—

Dustbins	11,662
Privy Middens	72
Pail Closets	179

The great majority of privy middens and pail closets are situate in areas where no public sewers or public water supplies are available.

(ii) Refuse Collection

The following table gives the number and types of receptacles cleansed and tonnage collected :—

	1956/57	1955/56	1954/55
Dustbins	470,996	439,186	428,562
Privy Middens	1,565	1,467	1,758
Pail Closets	9,212	9,819	9,979
Kitchen Waste Bins	20,310	29,151	29,170
Weight in Tons	9,636	9,222	8,748

During the winter months the Borough is divided into four areas for refuse collection while in summer the number of areas is three. Each truck carries a normal complement of a driver and three loaders and one truck serves one district.

For several years the Council has operated a successful bin bonus scheme and the drivers and loaders of the above trucks participate therein.

Another truck is engaged on Pail and Privy collection and bins remote from the normal collection rounds.

The following table gives particulars of collection by the various vehicles :—

Vehicle	Type	Duty	T.	C.	Q.
S.D. Fore and Aft 23	Rear Loader	Refuse Collection	2,238	10	2
S.D. Freighter 18 ...	Rear Loader	Refuse Collection	2,220	18	3
S.D. Freighter 19 ...	Rear Loader	Refuse Collection	1,916	9	1
Dennis 14	Side Loader	Refuse Collection	1,580	2	3
Fordson 20	Side Loader	Kitchen Waste Collection	350	2	2
Morris 15	Side Loader	Pail and Privy Collection	492	13	—
Bedford 16	Specialised Vehicle	Tailings and Cover Vehicle	91	10	3
Bedford 21	Side Loader	Spare Vehicle	393	5	—
Morris 22	Van	Waste Paper Collection	352	15	—
		Total ...	9,636	7	2

During the winter months it was possible to maintain a 7 day refuse collection of dustbins throughout the district except from those isolated dwellings picked up by special collection fortnightly.

During the summer period the collection was extended to 8 - 12 days due to holidays.

(iii) Refuse Disposal

Two methods of refuse disposal are in operation in the Borough, namely, mechanical separation and controlled tipping.

The amounts disposed of and the method of disposal are as follows :—

	T.	C.	Q.
1. KITCHEN WASTE			
Delivered to Halifax Cleansing Department for processing	228	7	—
2. MECHANICAL SEPARATION			
House Refuse	5,167	18	1
Trade Refuse	668	7	—
Tins from Queensbury and Shelf U.D.C.	62	8	1
Tins from Elland U.D.C.	38	15	2
3. BAILIFF BRIDGE TIP			
House Refuse	3,681	19	2
Trade Refuse	39	10	—
4. MARSH LANE TIP			
House Refuse	478	3	2
Total ...	10,365	9	0

Fifty-six per cent of house refuse, mainly from the Brighouse and Rastrick areas was delivered to the Refuse Disposal Works for Mechanical Separation after which the residual tailings were disposed of by controlled tipping at the adjacent tip.

Five per cent of the house refuse, from Southowram area, was tipped at Marsh Lane Tip, Southowram and the remaining 39% from Hipperholme and Bailiff Bridge areas was tipped at Bailiff Bridge Tip. Controlled tipping was practised, screened dust from the Disposal Plant being used for cover.

The tip at Atlas Mill Road is nearing saturation and a portion of about 3 acres was put down to grass during the year. A portion of Bailiff Bridge Tip too was nearing completion and was leased to a local farmer to cultivate.

Kitchen Waste is collected twice weekly and delivered to Halifax Cleansing Department for processing.

(iv) Salvage

(a) **Waste Paper.** Waste paper, collected by separate collection from business premises and by the refuse collectors, at the same time as normal house refuse, is graded, baled with a Powell baler as described in previous reports, and disposed of to Messrs. Thames Board Mills as has been done for many years.

The waste paper position was such that the Council had to despatch waste paper under a quota system. The following are details of the various grades of paper baled and disposed of :—

Grade	Tonnage Baled T.	C.	Q.	Tonnage Sold T.	C.	Q.	Percentage of grades sold
Newspapers	156	6	1	154	6	1	24.1%
Books and Magazines ...	77	9	2	70	9	2	11.0%
Strawboard	230	11	3	216	6	3	33.7%
Mixed Paper	217	9	1	199	9	1	31.2%
Total ...	681	16	3	640	11	3	

(b) **Kitchen Waste.** During the early part of the year collection of kichen waste continued from the 523 communal street bins placed at cafes, canteens and other food shops but from October the Council, as many other Authorities had done, decided to cease collection from the street bins, but to continue the collections from other sources. As a result there was a fall in the tonnage collected from 335 tons in 1955 to 228 tons 7 cwts. in the year under review.

(c) **Baled Destructor Scrap.** The demand for baled tins continued good and there was a considerable increase in the price obtainable. The bulk of the tins come from the separation plant, but good quantities are sorted from the tips and 101 tons 3 cwts. 3 qrs. were purchased from Elland and Queensbury Urban District Councils for baling. The Joint Scrap Survey Committee encouraged the separation of tins at the tips by the payment of a segregation allowance. In total 323 tons of baled tins were sold, as compared with 297 tons last year, for £2,232 11s. 7d.

(d) **Ferrous Metals.** Here again the demand continued and 26 tons were disposed of, compared with 30 tons last year, the revenue being £174 8s. 8d.

(e) **Non Ferrous Metals.** Non ferrous metals were easily disposed of and the 3 tons 2 cwts. sold produced a revenue of £353 11s. 5d.

(f) **Textiles.** Rags, string, carpetting, sacking and old beddings are all disposed of though, due to the dirty state of the rags, the market and price are both somewhat restricted. The tonnage disposed of was 61 tons 11 cwts. 3 qrs. and the revenue was £685 15s. 4d.

(g) **Other Items of Salvage.** The market for jars and bottles has gone and they were disposed of with difficulty. Screened cinder, which for many years has been sold at 5/- per ton, was doubled in price and in winter the market remained good, there usually being a two or three weeks waiting time for customers. Very little screened dust was sold, practically the whole production being used for tip cover for which it is very well suited.

(v) Departmental Revenue

The following is a detailed list of the Department's revenue obtained during the year :—

	T.	C.	Q.	£	s.	d.
(a) Refuse Collection :—						
Trade Refuse Charges				212	15	0
(b) Refuse Disposal :—						
Trade Refuse Charges				53	—	6
Scrap Metal Segregation Allowance ...				105	—	2
Fertiliser Subsidy				25	1	6
Other Income				2	16	—
(c) Salvage :—						
Baled Waste Paper	640	11	3	5,728	9	1
Kitchen Waste	228	7	—	816	3	6
Baled Destructor Scrap	323	—	2	2,232	11	7
Ferrous Metal	26	12	3	174	8	8
Non-Ferrous Metals	3	2	4	353	11	5
Textiles	61	11	3	685	15	4
Jars and Bottles	10	—	—	17	2	4
Screened Cinder	233	7	—	98	5	—
Screened Dust	10	—	—		5	—
Rubber		16	—	2	19	4
(d) Mechanical Transport :—						
Transport Charges				308	15	6
(e) Miscellaneous :—						
Sale of Waste Food Bins				107	5	—
Sale of Dustbins				548	2	—
Lethal Chamber Charges				28	5	6
Disinfectants				6	4	—
Totals ...	1,537	9	3	£11,506	16	5

(vi) Details of Refuse Collection Costs for the Year Ending 31st March, 1957

Item	Refuse Collection and Kitchen Waste			Nightsoil and Cesspools Collection			Total		
	£	s.	d.	£	s.	d.	£	s.	d.
LABOUR									
Wages	7,151	14	11	220	16	6	7,372	11	5
National Insurance	231	11	—	7	2	2	238	13	2
Superannuation	164	13	8	—	—	—	164	13	8
do. Add'l Allowance	37	10	7	—	—	—	37	10	7
Tools and Implement	75	15	3	—	—	—	75	15	3
Disinfectants	—	—	—	42	18	11	42	18	11
Waste Food Bins	21	5	3	—	—	—	21	5	3
Dustbins	502	16	4	—	—	—	502	16	4
Cesspool Emptying	—	—	—	49	11	—	49	11	—
Sundry Expenses	24	15	9	—	—	—	24	15	9
Protective Clothing	46	18	10	1	—	—	47	18	10
MECHANICAL TRANSPORT									
Drivers' Wages	3,842	4	9	232	10	11	4,074	15	8
National Insurance	123	13	—	7	9	9	131	2	9
Superannuation	111	16	7	11	12	6	123	9	1
Licences and Insurance ...	479	1	3	18	2	—	497	3	3
Repairs and Maintenance ...	496	5	—	21	15	—	518	—	—
Petrol and Oil	1,538	15	10	70	—	—	1,608	15	10
Tyres	205	10	—	—	—	—	205	10	—
Renewal Account Contribution	900	—	—	—	—	—	900	—	—
GROSS TOTAL... ...	15,954	8	—	682	18	9	16,637	6	9
INCOME and Charges to Refuse Disposal Account	2,686	4	—	6	4	—	2,692	8	—
NETT COST	13,268	4	—	676	14	9	13,944	18	9

(vii) Details of Refuse Disposal and Salvage Costs, Year Ending 31st March 1957

	£ s. d.	£ s. d.
Refuse Disposal and Salvage—		
Wages		4,664 12 9
National Insurance		152 14 9
Superannuation—		
Equivalent Contributions		98 3 5
Additional Allowances		46 8 —
Coke and Coal	47 15 4	
Gas	23 6 5	
Electricity	273 10 3	
Water	2 10 —	
Laundry and Cleansing Materials	8 7 9	
		355 9 9
Rents and Acknowledgments	12 4 6	
Rates	106 — —	
Insurance	55 11 —	
		173 15 6
Tools and Implements		130 10 9
Repairs—		
Plant and Machinery	264 4 3	
Building and Grounds	241 7 8	
		505 11 11
Protective Clothing		14 1 4
Loan Charges—		
Loan Interest	214 8 6	
Sinking Fund Contribution	139 — —	
		353 8 6
Other Expenses		65 3 4
Tip Cultivation		125 13 1
Revenue Contributions to Capital Outlay—		
Refuse Tipping Hopper		15 6 3
Lethal Chamber		13 3 6
Salvage Purchases		297 9 5
Mechanical Transport		693 3 —
Gross Costage		7,704 15 3
Revenue from Salvage Sales, etc. ...		9,507 11 5
CREDIT BALANCE		£1,802 16 2

(viii) Public Cleansing Costs for the Year Ending 31st March, 1957

Item	Particulars	Collection	Disposal	Totals	% of total gross expenditure
		£	£	£	
	REVENUE ACCOUNT				
1	GROSS EXPENDITURE:				
	(i) Labour	7,507	4,977	12,484	56.0
	(ii) Transport	6,695	693	7,388	33.8
	(iii) Plant, equipment, land and buildings	122	1,644	1,766	8.5
	(iv) Other items	126	391	517	1.7
	(v) Total gross expenditure ...	14,450	7,705	22,155	100%
2	GROSS INCOME	1,182	9,507	10,689	
3	NET COST	13,268	Cr. 1,802	11,466	
4	Capital expenditure met from revenue (included above) ...	—	15	15	
		s. d.	s. d.	s. d.	
	UNIT COSTS				
5	Gross cost per ton, labour only	15 7	9 1	24 8	
6	Gross cost per ton, transport only	13 11	1 4	15 3	
7	Net cost (all expenditure) per ton	27 6	Cr. 3 6	24 —	
		£	£	£	
8	Net cost per 1,000 population	435	Cr. 59	376	
9	Net cost per 1,000 premises ...	1,002	Cr. 135	867	

(ix) Operational Statistics

10	Area (statute acres)—land and inland water	7,875 acres
11	Population at 30th June, 1956	30,490 persons
12	Total refuse collected (tons)	9,636 tons
13	Weight (cwts.) per 1,000 population per day (365 days in the year)	17.3 cwts.
14	Number of premises from which refuse is collected	13,237 premises
15	Premises from which collections are made at least once weekly	77.6% of total
16	Average haul, single journey, to final disposal point (including miles by secondary transport)	1½ miles
17	Kerbside collection expressed as estimated percentage of total collection	—
18	Total refuse disposed of (of which 101 tons were disposed of for other local authorities)	10,365 tons
19	Methods of disposal (Salvage excluded)—	
	(a) Crude Tipping	—
	(b) Controlled tipping	44%
	(c) Direct incineration	—
	(d) Separation and controlled tipping	56%
	(e) Other methods	—
		100%

20 Salvage. Analysis of income and tonnage :—

		Income (included in item 2)	Tonnage Collected (included in item 12)
		£	Tons
(a)	Raw Kitchen Waste	816	228
(b)	Scrap Metal	2,866	353
(c)	Waste Paper	5,728	640
(d)	Other Salvage	804	316
(e)	Totals	10,214	1,537
21	Trade Refuse	266	707

LETHAL CHAMBER

One hundred and seventy dogs and 207 cats were humanely destroyed in the electrical lethal chamber and the chloroform lethal chamber provided by the Royal Society for the Prevention of Cruelty to Animals.

PUBLIC SANITARY CONVENIENCES

The Department is responsible for the cleansing and maintenance of all Public Conveniences.

The following is a complete list of Public Conveniences in the Borough :—

Situation.	Accommodation for Females.	Accommodation for Males.	
Back Bonegate	5 W.C.'s	5 W.C.'s	9 urinal stalls
Bradford Road	2 W.C.'s	1 W.C.	4 do.
Bramston Street	2 W.C.'s	1 W.C.	4 do.
Birds Royd Lane	Nil	1 W.C.	4 do.
Bus Station	4 W.C.'s	3 W.C.'s	6 do.
Mill Lane	Nil	Nil	4 do.
Crowtrees Lane	Nil	Nil	3 do.
Halifax Road, Hove Edge	3 W.C.'s	1 W.C.	4 do.
Whitehall, Hipperholme	2 W.C.'s	1 W.C.	4 do.
Stray, Lightcliffe	2 W.C.'s	2 W.C.'s	3 do.
Bailiff Bridge	1 W.C.	1 W.C.	3 do.
Clifton Road	Nil	Nil	3 do.
Rydings Park	3 W.C.'s	2 W.C.'s	3 do.
Rastrick Library	Nil	Nil	2 do.
Wellholme Park	4 W.C.'s	2 W.C.'s	6 do.
Lane Head Recreation Ground	2 W.C.'s	2 W.C.'s	1 do.
King George V. Memorial Park ...	1 W.C.	1 W.C.	Nil

During the year a change was made in the method of cleansing and instead of 2 men being employed for the cleansing of the bulk of the conveniences, 1 man with a motor cycle combination was employed on the work. In addition to cleansing the Sanitary Conveniences he was also made responsible for cleansing bus shelters.

Once again considerable wilful damage was caused to public conveniences, walls, windows, doors and locks all came in for their share of irresponsible damage. Wherever there were light coloured decorated walls and doors there was also disfigurement. Even the newest conveniences were so covered with grossly improper drawings in both male and female sections that the Council had to undertake the expense of tiling two of the newest ones, the work of which

is being done in the year 1957/58. The walls and doors of smaller out district conveniences were painted black as they became disfigured in an effort to provide some cheap easily maintained surface that would resist the malicious work of this small minority of the town's adolescents – for this particular damage appears to be the work of this section of the community.

The cost of the service for the year ending 31st March, 1957 was as follows :—

	£	s.	d.
EXPENDITURE			
Wages	871	4	11
National Insurance	28	6	5
Superannuation — Additional Allowances	91	3	1
Electricity	74	3	1
Water	94	19	6
Cleaning Materials	9	13	10
Toilet Requisites	20	4	—
Rents and Acknowledgements	8	16	6
Insurance	5	1	1
Repairs and Maintenance	133	1	2
Loan Charges—			
Loan Interest	198	17	4
Sinking Fund	337	—	—
Debt Managements		16	5
Rates	176	10	4
Protective Clothing	12	16	7
Other Expenses	4	3	5
Purchase of Motor Cycle Combination	242	13	6
Transport	23	4	8
	2,332	15	10
INCOME			
Receipts 303 4 1			
Weighing Machine Site Rents ... ... 17 — —			
Bus Operators — Contribution 227 12 10			
	547	16	11
NET EXPENDITURE ...	1,784	19	5

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